

SOUTH DAKOTA BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS
Thursday, September 8, 2016 – immediately following Joint Board Meeting
Public Board Meeting

NOTE: This meeting is being held in a physically accessible place. Individuals needing assistance, pursuant to the Americans with Disabilities Act, should contact the Legislative Research Council (605/367-7781) in advance of the meeting to make any necessary arrangements.

The public may attend the meeting using any of the following:

1. **Pierre - Public DDN site:** CAP A, 500 E. Capitol Ave., Room B12, Pierre, SD 57105
2. **Rapid City - Public DDN site:** Rapid City Dept. of Transportation (DOT), 2300 Eglin St, Rapid City, SD 57703
3. **Board Conference Room:** 101 N. Main Ave., Suite 215, Sioux Falls, SD 57104

Current Board Member Meeting Attendance Record¹

	KLB	DKB	WOC	MSC	LBL	BJL	DEL	JAM	EJR
3/11/15	☒	☒	☒	☒	☒	☒	☒	☐	N/A
6/11/15	☒	☒	☒	☒	☒	☒	☒	☒	N/A
7/21/15	☐	☒	☒	☒	☒	☐	☒	☒	N/A
9/10/15	☒	☒	☒	☒	R	☒	☒	☒	N/A
9/24/15	☒	☐	☒	☒	☒	☒	☐	☐	N/A
12/3/2015	☒	☒	☐	☐	☒	☒	☒	☒	N/A
3/3/2016	☒	☒	☒	☒	☒	☒	☒	☒	☒
6/2/2016	☒	☐	☒	☒	☒	☒	☒	☒	☒

Key: Dr. Bjordahl (KLB) Ms. Bowman (DKB) Dr. Carlson (WOC) Dr. Carpenter (MSC)
 Dr. Landeen (LBL) Dr. Lindbloom (BJL) Mr. Lust (DEL) Dr. Murray (JAM), Dr. Rosario (EJR)
 (N/A=before appointment, R=recused)

Meeting Agenda

Scheduled times are estimates only. Agenda items may be delayed due to prior scheduled items or items may be moved up on the agenda.

1. **10:00 am:** President Walter O. Carlson, MD, MBA: Welcome, call to order, roll call (Jane)
2. **Consent Agenda:** *The consent agenda allows the board to approve all these items together without discussion or individual motions. Items may be removed from the consent agenda on the request of any one member. Items not removed may be adopted by general consent without debate. Removed items may be taken up either immediately after the consent agenda or placed later on the agenda at the discretion of the assembly.²*
 - a. Agenda
 - b. Minutes: June 2, 2016
 - c. New licenses, permits, registrations and certificates
 - d. SD HPAP Report (South Dakota Health Professions Assistance Program)
 - e. Advisory Committee Business – Re-appointments and Committee meeting reports
 - f. Financial Report
 - g. Docket Review
3. **Five (5) Confidential Physician Hearings (Closed session pursuant to SDCL 36-4-31.5 unless privilege is waived by physician)**
4. **11:00 am: Public Hearing on Proposed Administrative Rules**
 - LRC Comments Form and Style
 - Rules Hearing Materials
5. **Genetic Counselors**
 - a. Article 20:82; Chapter 20:82:04; Section 20:82:04:01 and 02
 01: Continuing education requirements
 02: Reporting continuing education
6. **Physicians and Surgeons:**
 - a. Article 20:47; Chapter 20:47:07; Section 20:47:07:01 and 02
 01: Standards for documentation
 02: Definition of chronic pain

¹ Meeting attendance history available upon request

² Adapted from http://www.wvcc.edu/CMS/fileadmin/PDF/Learning_Center/Consent_Agenda_FAQ.pdf

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7. Physician Assistants

- a. Article 20:52; Chapter 20:52:01; Section 20:52:01:03:01 and 02
01: Supervision of a physician assistant
02: Repeal: ~~Supervision of a licensed physician assistant – Separate practice location~~

8. Noon Break

9. Public Hearings:

- a. Anthony Lund, applicant for EMT student status
- b. Rose Hoiten, CNM

10. Mobile Medic (*report pending - will be provided when completed*)

11. Draft language for future rules for review, discussion

- a. Spouses and Supervision
- b. Board actions imposed by other states

12. Executive Director Report

- a. Letter to SDBMOE
- b. Annual Reports
- c. Marty Link, Department of Health, Office of Rural Health
- d. Monthly Reports

13. Executive session: *SDCL 1-25-2(3): consult with legal counsel*

14. Future Meeting Dates

2016: Thurs. December 1

2017: Thurs. March 9; Thurs. June 8; Thurs. September 14; Thurs. December 14
FSMB Annual Meeting: April 20-22 Ft. Worth, TX

2018: Thurs. March 8; Thurs. June 14; Thurs. September 13; Thurs. December 13
FSMB Annual Meeting: April 26-28 Charlotte, NC

SOUTH DAKOTA BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

Unapproved Draft Minutes

Public Board Meeting

1. **Pierre - Public DDN site:** CAP A, 500 E. Capitol Ave., Room B12, Pierre, SD 57105
2. **Rapid City - Public DDN site:** University Center, 4300 Cheyenne Blvd., Room 113, Rapid City, SD 57703
3. **Board Conference Room:** 101 N. Main Ave., Suite 215, Sioux Falls, SD 57104

Unapproved Draft Minutes

Thursday, June 2, 2016 - 9:00 am (CDT)

Boards Members:

Present: Kevin Bjordahl, MD; Walter Carlson, MD; Mary Carpenter, MD; Laurie Landeen, MD; Brent Lindbloom, DO; Mr. David Lust; Jeffrey Murray, MD; Elmo Rosario, MD
Absent: Ms. Deb Bowman

Board Staff:

Present: Margaret Hansen, PA-C; Mr. Tyler Klatt; Ms. Jane Phalen; Ms. Misty Rallis

Counsel:

Present: Assistant AG Steven Blair (Board), Assistant AG Ellie Bailey (Staff)

Attendees:

Ste. 215: Physician assistant Mr. Clint Perman, Physician assistant Ms. Louise Papka, president South Dakota Physician Assistant Academy (SDAPA); Mr. Mark East, South Dakota State Medical Association (SDSMA)

Public DDN site: Rapid City: Mr. Jason Culberson, Paramedic, Pierre: Mr. Tim Engel, SD Medical Association Attorney

The meeting was a public meeting and other individuals may have been present.

Dr. Walter Carlson, president of the Board, called the meeting to order at 9:00 am. Roll was called and a quorum was confirmed.

Motions to approve the following were made and ratified by roll call vote:

- June 2, 2016 agenda (Landeen/unanimous)
- March 3, 2016, Board meeting minutes (Landeen/unanimous)
- March 1, 2016 through May 31, 2016 new licensure list (Landeen/unanimous)
- Financial report (Bjordahl/unanimous)
- Advisory Committee:
 - Physician Assistant new member: Mr. Clint Perman, PA-C (Landeen/unanimous)
 - Genetic Counselor re-appointments: Dr. Maria Palmquist and Mr. Quinn Stein, GC, (Murray/unanimous)
- Yankton County EMT Services AEMTs: Jean Scherschligt, Michael Slowey, and Kimberly Velk petitioned the board for an expansion of scope to include: diphenhydramine and Zofran (ondansetron) (IV), epinephrine 1:10,000 (IV/IO) and adult therapy by intraosseous infusion devices in emergent situations. These AEMTs will first complete education and training, and attend an ACLS and PALS course, and they will be required to complete continuing education in order to maintain competency. (Landeen/unanimous)
- Rapid City Fire Department mobile medic program petition extension of temporary approval order to the September meeting (Carpenter/unanimous)
 - Direct board staff to edit Protocol 9: Assessment to include language for the protocol to follow, and the form to use, when the patient refuses assessment by the mobile medic (Carpenter/unanimous)
- Hearings – assigned board member does not participate in discussion or vote:
 - Public:
 - Paramedic Curt Hasart: adopt administrative law judge's Findings of Fact, Conclusions of Law and recommendation to accept the voluntary surrender of paramedic license (Landeen/unanimous, assigned Board member Erickson no longer on the Board)
 - Paramedic Wade Wells: adopt administrative law judge's Findings of Fact, Conclusions of Law and recommendation to approve the Consent Agreement with Reprimand and 90-Day Suspension (Landeen/unanimous; assigned Board member Dr. Carlson abstained)
 - Certified Nurse Midwife Suzanne Ryan: approve Board of Nursing recommendation to reinstate the CNM license (Bjordahl/unanimous; assigned Board member Dr. Carlson abstained)
 - Closed physician hearings are confidential until final action is taken pursuant to SDCL 36-4-31.5:
 - Grady Reynolds Fort, MD: adopt administrative law judge's Findings of Fact, Conclusions of Law and recommendation: accept the request to withdraw application while under investigation (Landeen/unanimous; assigned Board member Dr. Lindbloom abstained)

- Kip Cardell Newell, DO: adopt administrative law judge's Findings of Fact, Conclusions of Law and recommendation to deny the application (Landeen/unanimous; assigned Board member Deborah Bowman was absent to the meeting)
 - Robert John Gustafson, MD: approve the agreement to accept the medical license as withdrawn under investigation (Landeen/unanimous; no Board member assigned to this case)
 - Stephen Charles Myers, MD: : adopt administrative law judge's Findings of Fact, Conclusions of Law and recommendation: reprimand (Bjordahl/unanimous; assigned Board member Dr. Laurie Landeen abstained)
- Changes to South Dakota statute:
 - SDCL 36-4-20.4: Duration of Locum Tenens Certificate accepted as presented by staff and to move forward with the Department of Health (DOH) legislative process (Carpenter/unanimous)
 - SDCL 36-4: Board staff, with Mr. David Lust, to draft and bring back to the September meeting: a new statute authorizing the Board to use funds for educational opportunities (Landeen/unanimous)
- Changes to South Dakota administrative rules:
 - Supervision of family members: table item and staff was directed to do further research as to how common the situation might be with all the professions affected, draft language for both supervisors (e.g. the physician) and the supervisees (e.g. PA, paramedic, athletic trainer, etc.) bring everything back to the September meeting: (Lust/unanimous)
 - Medical record documentation: SDSMA White Paper on Pain Management and Prescription Drug Abuse will not be put into rule but will be used as a guideline for staff to evaluate complaints. Direct the staff to prepare the language and include chronic pain definition for a rules hearing at the September meeting (Landeen/unanimous)
 - Genetic Counselor continuing education requirements as presented by staff: move forward for an administrative rules hearing (Carpenter/unanimous)
- Annual election of officers:
 - Continue with the current slate for president and vice president: Dr. Walter Carlson and Dr. Kevin Bjordahl respectively (Landeen/unanimous)
 - Dr. Laurie Landeen elected as secretary of Board (Carpenter/unanimous)
- Executive session pursuant to SDCL 1-25-2(3) to consult with legal counsel (Murray/unanimous) entered at 11:45 am and the public meeting resumed at 1:00 p.m.

Reports accepted for information:

- Advisory Committee Business
- Executive Director
- Complaints and investigations docket

The meeting adjourned at 2:00 pm CDT.

ⁱ 1-27-1.17. Draft minutes of public meeting to be available--Exceptions--Violation as misdemeanor. The unapproved, draft minutes of any public meeting held pursuant to § 1-25-1 that are required to be kept by law shall be available for inspection by any person within ten business days after the meeting. However, this section does not apply if an audio or video recording of the meeting is available to the public on the governing body's website within five business days after the meeting. A violation of this section is a Class 2 misdemeanor. However, the provisions of this section do not apply to draft minutes of contested case proceedings held in accordance with the provisions of chapter 1-26.

New Licenses issued from June 1, 2016 to August 24, 2016

Advanced EMT: 9

Athletic Trainer: 20

Dietician/Nutritionist: 8

EMT Student Status: 23

Genetic Counselors: 12

Genetic Counselor Temporary: 0

Medical Assistants: 38

Medical Corporations: 1

Medical License (MD/DO): 144: Petition: Ling Gao, MD – ABMS - Pathology

Nutritionists Temporary Permit: 3

Occupational Therapists: 6

Occupational Therapist Temporary Permit: 0

Occupational Therapy Assistants: 4

Occupational Therapy Assistants Temporary Permit: 1

Paramedics: 22

Physical Therapist Assistant Certificate: 10

Physical Therapists: 20

Physician Assistants: 8

Physician Assistant Temporary: 0

Physician Locum Tenens (60-Day Certificates): 23

Resident License: 60

Respiratory Care Practitioners: 22

Respiratory Care Practitioners Temporary Permit: 0

434
Total

Advanced EMT License

Total 9

License Number	Name	Address	Specialty	Issue Date
2068	Nancy J. Martinz	PO Box 847, 1105 Montgomery St. Custer, SD 57730		8/16/2016
2062	Rodney Alan Waddington	923 Crook Street Lot 1, Custer, SD 57730		8/4/2016
2055	Darin Michael Sinner	1825 Tanbury Lane, Brookings, SD 57006		7/28/2016
2064	Joni Adele Kanable	415 3rd Street West, Clear Lake, SD 57226		8/8/2016
2065	Scott Allen Ganschow	421 S Mary Ave, Tea, SD 57064		8/8/2016
2056	Rita Faye Sattler	820 E 12th Ave, Webster, SD 57274		7/28/2016
2073	Diana Lee Mayclin spinar	25258 US Hwy 281, Plankinton, SD 57368		8/24/2016
2054	Marcus Mauris Hollow Horn	Box 326, Eagle Butte, SD 57625		7/20/2016
2046	Debra Sue Headley	3008 Mary Street, Yankton, SD 57078		7/16/2016

Athletic Trainer License

Total 20

License Number	Name	Address	Specialty	Issue Date
0518	Alison Lea Olson	8253 countryside blvd, rapid city, SD 57702		6/9/2016
0535	Shannon Leah Hattervig	22854 Wildflower Lane, Rapid City, SD 57702		8/9/2016
0537	Jennifer Lynn Dalland	504 S. Tessa Ave., Hartford, SD 57033		8/24/2016
0536	Jordan Mason Lindberg	712 E 6th St, Dell Rapids, SD 57022		8/12/2016
0525	Kara Lynn Wetzel	1836 Montego Dr., Bismarck, ND 58503		7/2/2016
0519	Kelli Anne Bolton	639 Northern Lights Blvd, 3304 Box Elder, SD 57719		6/13/2016
0534	Jacob Michael Luiken	57977 882 Rd., Newcastle, NE 68757		8/8/2016
0527	Payton Robert Monson	403 E Glynn Drive, Parkston, SD 57366		7/7/2016
0523	Adam Joseph Melstrom	W5243 Pine St., Durand, WI 54736		7/2/2016
0521	Nicole Branigan Court-Menendez	152 Pettingill St, Lewiston, ME 04240		7/2/2016
0524	Brian Frederick Hardy	15470 Holbein Drive, Colorado Springs, CO 80921		7/2/2016
0522	Brandon Bruce Janike	26322 15th Street, Minneapolis, MN 56068		7/2/2016
0520	Tanner Branch Wolf	1010 S Cleveland, Pierre, SD 57501		7/2/2016
0533	Erik Olaf Curry	1013 Southridge Road, New Ulm, MN 56073		8/1/2016
0528	Kyli Leah Haines	6905 60th Ave, Kearney, NE 68845		7/13/2016
0529	Ransom T Bearden	147 Navajo, Sheridan, WY 82801		7/14/2016
0526	Nicole Laura Ackermann	106 Highland Avenue, Newcastle, WY 82701		7/2/2016
0530	Gina Michelle Fritz	404 South Phillips Ave, Colman, SD 57017		7/14/2016
0531	John Francis Boehnke	306 W 36th Street Apt. 38, Sioux Falls, SD 57105		7/27/2016
0532	Kristina Anne Burk	10892 Zephyr St. , Westminster, CO 80021		7/29/2016

Dietician/Nutritionist License

Total 8

License Number	Name	Address	Specialty	Issue Date
0569	Sara Elizabeth Braskamp	45841 233rd Street, Wentworth, SD 57075		7/1/2016
0565	Amanda Jo Lambrechts	903 Jackson Street Apt 2, Yankton, SD 57078		6/1/2016
0570	Janet Ann Kehm	1233 3rd Ave SW, Le Mars, IA 51031		7/1/2016
0567	Karley Catherine Briggs	3005 Mary Street, Yankton, SD 57078		6/9/2016
0571	Jennifer Ashley-Marie Pepin	520 6th St. W., Mobridge, SD 57601		7/1/2016
0568	Shauna Lee Hamley	5000 W. 55th Street, Sioux Falls, SD 57106		6/13/2016
0575	Elizabeth Caroline Volzke	2405 W. City Limits Road #320, Yankton, SD 57078		8/19/2016
0566	Jessica Tiffany Zoller	2104 Hemphill St. Apt 3. , Fort Worth, TX 76110		6/3/2016

EMT Student Status

Total 23

License Number	Name	Address	Specialty	Issue Date
3750	Patrick James Urbaniak	1301 Evergreen Dr, Sturgis, SD 57785		7/29/2016
3764	Silas James Busch	2764 Chevae Ct. , Rapid City, SD 57703		8/24/2016
3749	Danielle Ann Sargent	14 Mile High Dr., Deadwood, SD 57732		7/26/2016
3754	Christine Dawn Roseland	27 Quincy St, Rapid City, SD 57701		8/4/2016
3748	Hunter Wayne Bradley	11392 Mount Roosevelt Road, Deadwood, SD 57732		7/22/2016
3763	Ethan Lester Esposti	24430 Nellie Lane, Keystone, SD 57751		8/15/2016
3753	Cathleen Patricia Barnes	P.O. Box 9563, Rapid City, SD 57702		8/4/2016
3751	Tanner John Urbaniak	1301 Evergreen Dr., Sturgis, SD 57785		7/29/2016
3761	Timothy Joseph Hoselton	2 Anaconda Road, Rapid City, SD 57701		8/11/2016
3744	Scott Edward Flockhart	1212 Clover Ridge Dr., Rapid City, SD 57701		6/8/2016
3743	Cory Edward Nelson	1932 Arizona Ave., Sturgis, SD 57785		6/1/2016
3745	Eric Christopher Shattuck	3301 Palmer Dr., Rapid City, SD 57702		6/13/2016
3747	Anthony Louis Hudson	809 E. 5th , Chadron, NE 69337		6/28/2016
3742	William Harris Day	14794 Highlight dr , Rapid City, SD 57703		6/1/2016
3746	Adriana Janay Thomas	389 Expectation Street , Box Elder, SD 57719		6/22/2016
3756	Ashlee Anne Keith	3712 Redlodge Drive , Gillette, WY 82718		8/8/2016
3752	Jordan Sean Parr-Hess	717 Dartmouth Ave., Newell, SD 57760		8/1/2016
3757	Hannah Elizabeth Burtt	238 E Hudson St, Spearfish, SD 57783		8/9/2016
3762	Meagan Rene' Radliff	1340 Junction Ave, Sturgis, SD 57785		8/12/2016
3755	Tate Edward Hayford	3022 10th Ave, Spearfish, SD 57783		8/4/2016
3758	Colleena Rae Jaukkuri	1220 Cedar St apt 209 , Sturgis, SD 57785		8/9/2016

3759	Jacob Tyler Weaver	262 Dunn Ct. , Box Elder, SD 57719	8/10/2016
3760	Steven Ray Blume	147 Shooting Star Lane, Custer, SD 57730	8/11/2016

Genetic Counselor License

Total 12

License Number	Name	Address	Specialty	Issue Date
0081	Carrie Lynn Chou	303 NE 133rd Street, Seattle, WA 98125		7/14/2016
0085	RaeAnn Lei Kragenbring	3000 S Louise Ave, #305 Sioux Falls, SD 57106		8/3/2016
0080	Taylor Alexandra Zuck	601 N Phillips Ave Apt 211, Sioux Falls, SD 57104		7/2/2016
0078	Stephanie Elaine Farner	7470 Santo Domingo Ave., Las Vegas, NV 89178		6/3/2016
0082	Dinah Marlane Clark	61 W. Euclid Ave., Haddonfield, NJ 08033		7/20/2016
0079	James Andrew Zdrodowski	644 Sorel Dr., Canton, MI 48188		6/13/2016
0084	Lindsey Beth Campbell	631 Burgundy Place, Yardley, PA 19067		7/29/2016
0086	Claire Alexis Clark	13203 NE 190th Pl., Woodinville, WA 98072		8/8/2016
0089	Lindsay Marie Dohany	12653 Fall River Dr., South Lyon, MI 48178		8/24/2016
0088	Jill Elizabeth Polk	2559 Princeton Rd , Cleveland Heights, OH 44118		8/17/2016
0083	Heidi Joanne Owen	925 Bird Ave., Birmingham, MI 48009		7/20/2016
0087	Tessa Jane Niemchak	37601 Laramie Street, Westland, MI 48185		8/16/2016

Medical Assistant Registration

Total 38

License Number	Name	Address	Specialty	Issue Date
1262	Nina Renee Hanna	112 N Lake Blvd, Columbia, SD 57433-2014		6/23/2016
1258	Gena E Eagle	605 N. Foster, Mitchell, SD 57301		6/10/2016
1282	Jordan Mykah Miller	1430 South Frontier Dr., Huron, SD 57350		8/4/2016
1255	Taylor Jenevieve Jessen	518 E. 8th Ave., Redfield, SD 57469		6/3/2016
1286	Leighah Faye Hertel	305 Wisconsin Ave., Geddes, SD 57790		8/16/2016
1279	Jill Nicole DeVries	201 West 2nd St., Elkton, SD 57026		8/1/2016
1288	Brooke Alexandrya Duffey	217 S Main St, Artesian, SD 57301		8/18/2016
1284	Lacey Jo Haneca	2913 East 15th Street, Sioux Falls, SD 57103		8/11/2016
1287	Gene Cody Crawford	1605 1/2 Wood Avenue, Rapid City, SD 57701		8/16/2016
1264	Kayla Nicole Pedersen	PO Box 252, Wilmot, SD 57279		6/24/2016
1283	Keisha Marie Forster	600 S. Blauvelt Ave., Sioux Falls, SD 57103		8/4/2016
1263	Sandra Denise Hoogendoorn	3112 S Harmony Ct, Sioux Falls, SD 57110		6/24/2016
1261	Angela Marie Sturm	805 West Tradewinds Street, Sioux Falls, SD 57108		6/23/2016
1274	Amber Marie Andersen	105 North Mari Car Drive, Sioux Falls, SD 57107		7/21/2016
1290	Noelle Page Risse	802 Kay Cee Ave, Martin, SD 57551		8/24/2016
1269	Abigail Lee Perry	506 S Fir Avenue, Presho, SD 57568		6/30/2016
1289	Jamie Lynne Cheng	221 W 4th Avenue, Lennox, SD 57039		8/23/2016
1253	Candy May Egan	3705 W 93rd Street, Sioux Falls, SD 57108		6/2/2016
1272	Trina Kathryn Park	602 Prairie View Circle, Dell Rapids, SD 57022		7/14/2016
1260	Janine Carol Verschoor	4034 Recluse Ct., Rapid City, SD 57701		6/21/2016
1267	Christina Marie Allery	37788 127th St., Aberdeen, SD 57401		6/29/2016

1278	Julie Lyn Isaak	18111 25th Ave. NE, GG102, Marysville, WA 98271	8/1/2016
1275	Jennifer Marie Ganske	109 N. 2nd Street, PO Box 401 Fort Pierre, SD 57532	7/22/2016
1254	Erica Rose Bender	1119 3rd Ave. W., Mobridge, SD 57601	6/3/2016
1281	Otto Rene Garcia	7452 W. Legacy Ct., Sioux Falls, SD 57106	8/3/2016
1268	Melinda Ann Smith	11104 Ridge Road, Belle Fourche, SD 57717	6/30/2016
1285	Haley Sue Delancey	302 East 4th, Mount Vernon, SD 57363	8/15/2016
1257	Samantha Ann Daniels	1507 3rd Ave. SE, Aberdeen, SD 57401	6/10/2016
1273	Marissa Paige Beck	31548 105th St., Artas, SD 57437	7/20/2016
1266	Rita Lynn Finney	14675 Telluride St., Summerset, SD 57718	6/27/2016
1271	Katlyn Marie Chaloupka	808 SD Hwy 15, Wilmot, SD 57579	7/13/2016
1270	Barbara J Holway	4215 Cedar Ridge Place, Apt 49, Rapid City, SD 57702	7/6/2016
1259	Natalie Erin Booth	334 Norbeck Ct., Box Elder, SD 57719	6/13/2016
1256	Kelsey Ranae Cordell	521 Center Ave, Garretson, SD 57030	6/3/2016
1265	Alyssa Kay Reyelts	1008 East Main Street, Wilmot, SD 57279	6/24/2016
1280	Megan Rose Armfield	2919 Marlin Drive Apt #301, Rapid City, SD 57703	8/3/2016
1276	Darby Jade Wilson	1002 Redwood Ave, Onida, SD 57564	7/29/2016
1277	Ashley Erin Washegesic	2117 Goodrich Ave., Aberdeen, SD 57401	7/29/2016

Medical Corporation Registration

Total 1

License Number	Name	Address	Specialty	Issue Date
0584	The Allergy Clinic Prof. LLC	1828 W. Kansas City St., Rapid City, SD 57701	Allergy and Immunology	7/14/2016

Medical License (MD/DO)

Total 144

License Number	Name	Address	Specialty	Issue Date
10008	Larry Dean Christensen, MD	920 SW 4th Avenue, Pipestone, MN 56164	Family Medicine/General Practice	6/30/2016
10081	David John Gayton, MD	1820 Santa Gertrudis Dr, Bismarck, ND 58503-0863	Emergency Medicine	8/18/2016
10069	Michael Patrick Grant, MD	75 Springdale Place, Longmont, CO 80504	Orthopedic Surgery	8/9/2016
9996	David Shabaz ally Eshak, MD	108 East 81st St., Apt. 1C, New York, NY 10028	Internal Medicine (General)	6/28/2016
9998	Justin Alan Clem, MD	1708 S 1st Ave, Sioux Falls, SD 57105	Family Medicine/General Practice	7/1/2016
10071	Ukamaka Nwakaife Nwadibia, MD	6908 South Heatherridge Avenue, Sioux Falls, SD 57108	Internal Medicine (General)	8/10/2016
10047	Donella Lynn Herman, MD	3005 South Norton Ave, Sioux Falls, SD 57105	Family Medicine/General Practice	7/26/2016
10048	Sean Patrick McGrann, MD	114 E 20th St, Sioux Falls, SD 57105	Internal Medicine (General)	7/27/2016
10064	Brandyn Ashley Tarap, MD	502 E. Monroe St, Rapid City, SD 57701	Family Medicine/General Practice	8/9/2016
10003	John Westmoreland Hume, MD	7802 Maple Trace Drive, Houston, TX 77070	Physical Med. & Rehab.	6/29/2016
10087	Gregory Raphael Kotnis, MD	1274 Steele Street, Denver, CO 80206	Pathology	8/22/2016
9974	Emily Marie Lampe, MD	550 S Grant Street, Denver, CO 80209	Neurology	6/7/2016
9992	Jeffrey Charles Wagner, MD	640 S Gaylord Street, Denver, CO 80209	Neurology	6/17/2016
9966	Russell Edward Bartt, MD	1235 S. Gaylord St., Denver, CO 80210	Neurology	6/2/2016
9965	Ira Chang-Richmond, MD	300 Conifer Dr., Evergreen, CO 80439	Neurology	6/2/2016
9905	Michelle Lee Krohn, DO	427 Bayard St., Iowa City, IA 52246	Obstetrics and Gynecology	7/1/2016
10026	Kristen Jennifer Kent, MD	309 Grand Street, Apt. 1, Hoboken, NJ 07030	Emergency Medicine	7/15/2016
9927	Shakeel Ahmed, MD	5804 Annapolis Road, #605, Bladensburg, MD 20710	Internal Medicine (General)	7/1/2016

10045	Molly Robinson Mathews, MD	653 W. 23rd Street, Ste. 294, Panama City, FL 32405	Emergency Medicine	7/25/2016
10011	Danielle Adina Cadle, DO	120 Viking Dr., Rapid City, SD 57701	Family Medicine/General Practice	7/5/2016
9987	Jason Joseph Miiller, MD	1342 Oxford Place, Iowa City, IA 52240	Psychiatry	6/14/2016
9907	Elyse Nicole Brock, MD	105 S. Park Ridge Road, North Liberty, IA 52317	Obstetrics and Gynecology	7/1/2016
9922	Edwin Fredrick Weiler, MD	14206 S. 21st St., Bellevue, NE 68123	Anesthesiology	7/7/2016
10025	Denise Sue Hanisch, MD	46664 306th Street, Beresford, SD 57004	Family Medicine/General Practice	7/15/2016
10006	Guillermo Emilio Noguera, MD	5473 Baldwin Park Street, Orlando, FL 32814	Internal Medicine (General)	6/30/2016
10007	Ramtin Thomas Ramsey, MD	7349 E. Woodsage Lane, Scottsdale, AZ 85258	Internal Medicine (General)	6/30/2016
9964	Mary Linley Phillips, MD	2091 Elk Ridge Road, Ferguson, NC 28624	Radiology	6/1/2016
9921	Russell James Swan, MD	2926 South Fisher Circle, Salt Lake City, UT 84109	Ophthalmology	7/1/2016
9935	Mandi Greenway Bietz, MD		Dermatology	7/1/2016
10079	Hee Jae Yoon, MD	2701 Sunflower St., Brandon, SD 57005	Radiation Oncology	8/16/2016
10020	Christine Pocha, MD	5505 Ridge Park Road, Edina, MN 55436	Internal Medicine (General)	7/8/2016
9986	Keith Douglas Balderston, MD	33437 Hampton Rd. , Eugene, OR 97405	Obstetrics and Gynecology	6/14/2016
10012	Drew John Jorgensen, MD	2110 Sims Place, La Crosse, WI 54601	Internal Medicine (General)	7/5/2016
9971	Emily Renee Haggerty, MD	324 West Water #413, Syracuse, NY 13202	Internal Medicine (General)	7/1/2016
10080	Gregory Mark Gerrish, MD	2221 Grant Drive NW, Watertown, SD 57201	Surgery (General)	8/17/2016
10060	Sudheer Reddy Muduganti, MD	2107 S. Washington Avenue, Marshfield, WI 54449	Internal Medicine (General)	8/4/2016
10078	Jonathan Tzvi Klein, MD	D.N. Galil Tahton, Mitzpe Netofa, 1529500 Israel,	Internal Medicine (General)	8/16/2016

9994	Jim Zhengbin Lu, MD	23855 Barnswallow Lane, Wauconda, IL 60084	Pathology	6/20/2016
10042	Christopher Patrick O'brien, MD	7101 Cresthill Drive, Knoxville, TN 37919	Ophthalmology	7/22/2016
10023	Lu Yu Huber, MD, PHD		Neurology	7/14/2016
9952	Margaret Ann Carmody, MD	6209 S. Landau Cir., Sioux Falls, SD 57108	Neurological Surgery	6/24/2016
10044	Nancy Wendy Hendrix, MD	711 Ridge Road, Mount Airy, MD 21771	Obstetrics and Gynecology	7/25/2016
10049	Ngozi Offiong Nwakamma-Okoro, MD	6160 Quinwood Lane, Apt. 6214, Plymouth, MN 55442	Other Specialties	7/27/2016
9999	Megan Leigh Kippes, DO	40092 US Highway 18, Delmont, SD 57330	Internal Medicine (General)	7/1/2016
10072	Kristen Marie Prescott, MD	864 12th Ave West, Dickinson, ND 58601	Pediatrics (General)	8/10/2016
10065	Andrea Jo Pham, DO	3708 S. Bedford Ave, Sioux Falls, SD 57103	Emergency Medicine	8/8/2016
10054	Scott Allen Kindle, MD	2909 W. Cinnamon Circle, Sioux Falls, SD 57108	Dermatology	8/1/2016
10074	Akram Mohammed abdelfatah Zaaqoq, MD	4720 Center Blvd., Apt. 1711, Long Island City, NY 11109	Internal Medicine (General)	8/11/2016
10061	Catherine Marie Brockmeier, DO	1117 W Goldthread Circle, Sioux Falls, SD 57108	Obstetrics and Gynecology	8/4/2016
10021	Jessica Leigh Olcott, MD	901 W. Golden Eagle St., Sioux Falls, SD 57108	Pediatrics (General)	7/11/2016
10077	Adriana Andrea Escandon sandino, MD	1900 N Bayshore Dr Apt 3012, Miami, FL 33132	Neurology	8/16/2016
10073	Gregory William Osmond, MD	3612 Chisholm Place, Bismarck, ND 58503	Pathology	8/11/2016
10083	Joshua Mark Matthews, MD	190 Del Mar Shores Terrace, Unit 59, Solana Beach, CA 92075	Orthopedic Surgery	8/18/2016
10035	Julie Lynn Weigandt, MD	2304 Dean Drive, Mitchell, SD 57301	Obstetrics and Gynecology	7/20/2016
10063	Caitlin Amanda Oksienik, MD	3498 E. Ellsworth Ave., Apt. 405, Denver, CO 80209	Neurology	8/8/2016
10062	Alicia Erin Bennett, DO	1820 S. Adams St., Denver, CO 80210	Neurology	8/8/2016
10068	Lindsey Anne Johansen hanson, MD	206 N. Walnut Ave., Canby, MN 56220	Family Medicine/General Practice	8/9/2016
10043	Kerri Lyn Harting, MD	7505 Metro Blvd, Suite 400 Edina, MN 55439	Radiology	7/25/2016

9978	Laura Jean Hoefert, MD	323 SW 10th Street, Madison, SD 57042	Family Medicine/General Practice	7/1/2016
9968	Douglas James Hess, DO		Psychiatry	6/2/2016
10022	Enesi Olufemi Makozi Momoh, MD	2400 NE 65th Street, Apt 523, Fort Lauderdale, FL 33308	Orthopedic Surgery	7/13/2016
9980	Kathy Marie Kotschegarow, MD	6206 South Avalon Ave, Apt 308, Sioux Falls, SD 57108	Family Medicine/General Practice	7/1/2016
10034	Anish Patel, MD	125 Muirfield CT, Vermillion, SD 57069	Internal Medicine (General)	7/20/2016
10067	Nicholas Patrick VenOsdel, MD	1511 S. Norton Ave., Sioux Falls, SD 57105	Pediatrics (General)	8/8/2016
10010	John Jacob Kinross-Wright, MD	4416 E Harwood Circle, Sioux Falls, SD 57103	Internal Medicine (General)	7/1/2016
10001	Joel Ray Eggers, DO	502 W. Cedar Rd., Chamberlain, SD 57325	Family Medicine/General Practice	7/1/2016
9990	Jo Anne Burkhalter, MD	1218 560th Street, Cherokee, IA 51012	Dermatology	6/16/2016
10051	Ryan Paul Hodnick, DO	5931 Night Shadow Avenue, Albuquerque, NM 87114	Emergency Medicine	7/29/2016
9982	Amy Christine Cook, MD	1115 East 20th Street, Sioux Falls, SD 57105	Family Medicine/General Practice	7/1/2016
9997	Carin Marie Martinson, MD	1115 East 20th Street, Sioux Falls, SD 57105	Family Medicine/General Practice	7/1/2016
10029	Patricia Lynn Roy, MD	7 Blue Stem Court, Streamwood, IL 60107	Psychiatry	7/19/2016
10089	Luis Alberto Ochoa, MD	25 Lincoln Ave., Apt 10, Iowa City, IA 52246	Pediatrics (General)	8/23/2016
9962	Melissa Mae Moutray, MD	16301 Loop Street, Omaha, NE 68136	Other Surgical Specialties	7/1/2016
9979	Danny Owen Stene, MD	600 University Street, Suite 1400, Seattle, WA 98101	Emergency Medicine	6/8/2016
10004	John Winans Hutchison, MD	201 Dakota Street, Barney, ND 58008	Neurological Surgery	6/29/2016
9973	Teresa Virginia Durbin, MD	2274 East 1975 North, Layton, UT 84040	Obstetrics and Gynecology	6/7/2016
10053	Divyajot Singh Sandhu, MD	110 East 18th Street, Apt. 423, Minneapolis, MN 55403	Neurology	8/1/2016

9983	Mwiza Gausi, MD	4705 Jefferson Wood Ct., Greensboro, NC 27410	Internal Medicine (General)	6/13/2016
10027	Joseph Harper Carreau, MD	2174 Westminister Circle, Coralville, IA 52241	Orthopedic Surgery	7/15/2016
9939	Hannah Irene Dewald, MD	5565 E. Custer Place, Denver, CO 80246	Obstetrics and Gynecology	7/1/2016
9969	Rhiana Dawn Saunders, MD	2718 Caledonian Court, San Antonio, TX 78230	Other Specialties	6/2/2016
10070	Muhammad Asad Mirza, MD	124 Eileen Drive, Cedar Grove, NJ 07009	Internal Medicine (General)	8/10/2016
10036	<u>Ling Gao, MD *Petition</u>	5805 S. Dorchester Ave., Apt. 3C, Chicago, IL 60637	Pathology	7/21/2016
9945	Jeremy James Macke, MD	1000 Alameda Drive, Longwood, FL 32750	Radiology	7/1/2016
9967	Scott David Burry, MD	102 Pierce Lane, Bigfork, MT 59911	Emergency Medicine	6/2/2016
10016	Melissa Nichole Holtz, MD	1352 Fox Ridge Trail, Sioux City, IA 51104	Obstetrics and Gynecology	7/7/2016
9972	David Agyapong, MD	6801 Los Volcanes Rd, NW, Apt. A07, Albuquerque, NM 87121	Internal Medicine (General)	6/7/2016
10046	Diane Carravetta Stein, MD	3779 S. Camino del Golfista, Green Valley, AZ 85614	Psychiatry	7/26/2016
10030	Matthew John Cazan, MD	612 Main Street, Murdo, SD 57559	Family Medicine/General Practice	7/20/2016
9938	Heather Marie Kleeman, DO	1811 Preamble Lane, Lincoln, NE 68521	Family Medicine/General Practice	7/1/2016
9906	Tyler Timothy Bergstrom, MD	18943 117 Lane SE, Renton, WA 98058	Surgery (General)	7/1/2016
9919	Katherine Jean Whaley, MD	2109 Bridgewater Dr., Columbia, MO 65202	Obstetrics and Gynecology	7/1/2016
9864	Jacob Steven Schaeffer, MD		Surgery (General)	6/29/2016
9981	Ever Luizaga-Coca, MD	1113 Cross Creek Dr., Uniontown, PA 15401	Critical Care Medicine	6/8/2016
9920	Tyler John Koedam, MD	8808 Geiser Grove, Richland, MI 49083	Emergency Medicine	7/1/2016
10018	Andrew Lee Matthews, MD	19402 Laurel Glen Avenue, Cornelius, NC 28031	Emergency Medicine	7/8/2016
10037	Vunghi Hoang, MD	PO Box 2363, Elk Grove, CA 95759	Internal Medicine (General)	7/21/2016

10009	Thomas Henry Reif, MD	6131 Ingalls Street, Melbourne, FL 32940	Internal Medicine (General)	7/1/2016
9976	Colin Adrian Meghoo, MD	2218 South 46th Street, Fort Smith, AR 72903	Surgery (General)	6/7/2016
10000	Jaret Michael Copeman, DO	7909 South Sunny Oak Circle, Sioux Falls, SD 57108	Emergency Medicine	7/1/2016
10088	Tiago Filipe Santos Miguel, MD	5630 Via De La Plata Circle, Delray Beach, FL 33484	Internal Medicine (General)	8/22/2016
9985	Chirag Kirit Desai, MD	10314 Coram Drive, Bakersfield, CA 93311	Internal Medicine (General)	6/14/2016
10005	Martin Landon Ladwig, MD	1074 E. Lower Rock Creek Road, Inkom, ID 83245	Obstetrics and Gynecology	6/29/2016
9975	Jenna Marie King, DO	1301 S. Cliff Ave., Ste. 300, Sioux Falls, SD 57117	Rheumatology	6/7/2016
10002	Travis John Hanson, MD	2627 N. 122nd Circle, Omaha, NE 68164	Internal Medicine (General)	6/29/2016
9963	Michael Orin Yung, MD	19811 Birch Street, Gretna, NE 68028	Radiology	7/1/2016
10057	Kirk Darwin Crouser, MD	1459 Hollow Tree Drive, Findlay, OH 45840	Internal Medicine (General)	8/2/2016
9991	Hossein Ghofrani, MD	1725 Butler Ave, Apt 302, Los Angeles, CA 90025	Nephrology	6/17/2016
10019	David William Tesar, MD	736 W Ingomar Road #415, Ingomar, PA 15127	Neurology	7/8/2016
9984	Angelo Humberto Paredes, MD	3342 Highline Trail, San Antonio, TX 78261	Gastroenterology	6/13/2016
10075	Seri Ann Carney, MD	195 Grandville Road SW #3813, Rochester, MN 55902	Anesthesiology	8/12/2016
10066	Yousef Ebeid Tadros, MD	3025 Pointewest Dr., Augusta, GA 30909	Urology	8/8/2016
10031	Dileep Raman, MD	4500 N. Lewis Ave., Sioux Falls, SD 57104	Internal Medicine (General)	7/20/2016
10033	Jordan Lee Nordquist, MD	1781 Spyglass Drive Apt 134, Austin, TX 78746	Psychiatry	7/20/2016
10032	John David Griffin, MD	12 Annie Drive, Farmington, MO 63640	Internal Medicine (General)	7/20/2016
10058	Michael Allen Gooden, MD	4970 N. Camino Antonio, Tucson, AZ 85718	Vascular Surgery	8/2/2016
10015	Joseph Thomas Crepps, MD	3220 Orion Drive, Colorado Springs, CO 80906	Vascular Surgery	7/7/2016

10017	Shella Kumar Mongia, MD	381 Elm Drive, Roslyn, NY 11576	Pathology	7/8/2016
9946	Casey Roy Green, MD	3295 NW 147th place, Portland, OR 97229	Emergency Medicine	7/1/2016
9970	James Won, MD	707 Avenida Majorca Unit G, Laguna Woods, CA 92637	Neurology	6/2/2016
10055	Susan Lynn Scarberry, MD	4901 Loden Court South, Fargo, ND 58104	Neurology	8/1/2016
9995	Jeffrey Ralph Smith, MD	1206 Salmon St., Bismarck, ND 58503	Dermatology	6/28/2016
10052	Syyeda Afreen Siddiqui, MD		Internal Medicine (General)	7/29/2016
10039	Ryan James Noonan, MD	11 Stafford Court, Gillette, WY 82718	Family Medicine/General Practice	7/21/2016
9977	Santosh Sigdel, MD	5728 E. Red Oak Dr., #10, Sioux Falls, SD 57110	Internal Medicine (General)	7/1/2016
10013	Betty Vassiliki Koukis, MD	107 TWIN LAKES DRIVE, Moultrie, GA 31768	Obstetrics and Gynecology	7/5/2016
9988	Kelly Marie Evans hullinger, MD	265 Indian Hills Rd., Brookings, SD 57006	Internal Medicine (General)	7/1/2016
9989	Heath Allan Eggleston, MD	606 Custer St., Spearfish, SD 57783	Family Medicine/General Practice	7/1/2016
9993	Nathaniel Silas Chappelle, MD	220 N. Adams Ave., Pierre, SD 57501	Family Medicine/General Practice	7/1/2016
10085	Doreen Aryee, MD	2499 Peachtree Road NE, Atlanta, GA 30305	Internal Medicine (General)	8/22/2016
9934	Matthew Julian Wideroff, MD	906 Turner Rd, Delray Beach, FL 33483	Surgery (General)	7/1/2016
10040	Giovanni Maria Salerno, MD	5508 N. 4690 W. , Bourbonnais, IL 60914	Surgery (General)	7/21/2016
10024	Jacob James Miller, MD	1432 East Vine Street, Murray, UT 84121	Other Specialties	7/14/2016
10038	Mark Daniel McCubbin, MD	13248 Rohn Road, Fenton, MI 48430	Nephrology	7/21/2016
10014	Muhammad Ateeq Arshad, MD	1475 Walton Avenue. 5 B, Bronx, NY 10452	Neurology	7/6/2016
10059	Nicole Lee Plenty, MD	4004 Amberly Road, Montgomery, AL 36116	Obstetrics and Gynecology	8/2/2016
10076	Praveen Devineni, MD	221 Madison Place, Shrewsbury, MA 01545	Internal Medicine (General)	8/15/2016

9910	Udit Bhaskar Bhatnagar, MD	5005 W. Equestrian Pl., Apt. 2106, Sioux Falls, SD 57106	Internal Medicine (General)	7/1/2016
10028	Christina Marie Olson, DO	8505 South Regent Park Drive, Sioux Falls, SD 57108	Family Medicine/General Practice	7/18/2016
10082	Stephanie Jo Anne Lahr, MD	23840 Coyote Flats Rd., Rapid City, SD 57702	Internal Medicine (General)	8/18/2016
10041	Ryan Patrick Brennan, MD	2301 9th St. Ct. NW, Gig Harbor, WA 98335	Neurological Surgery	7/21/2016
10050	Jason Henry Przybylo, MD	219 Windflower Bend, Dakota Dunes, SD 57049	Neurological Surgery	7/27/2016
10084	Oksana Ivanovna Anand, MD	728 Augusta Place, West Fargo, ND 58078	Internal Medicine (General)	8/19/2016
10086	Nielsen Howard Burns, MD	304 East 8th Ave., Fort Pierre, SD 57532	Family Medicine/General Practice	8/22/2016

Nutritionist Temporary Permit

Total 3

License Number	Name	Address	Specialty	Issue Date
0574	Chase Michael Merfeld	21884 Running Deer Trail, Piedmont, SD 57769		8/16/2016
0572	Mollie Jo Loes	1301 Palmer Pl, Mitchell, SD 57301		6/28/2016
0573	Elizabeth Caroline Volzke	2405 W. City Limits Road #320, Yankton, SD 57078		7/25/2016

Occupational Therapist License

Total 6

License Number	Name	Address	Specialty	Issue Date
1011	Meagan Leann Whitcher	703 Northern Lights Road, Livingston, MT 59047		8/24/2016
1008	Shannon Marie Conn	114 Sunrise Dr. , Mina, SD 57451		8/1/2016
1007	Melissa Joy Halseth	3107 E. Marson Drive, Sioux Falls, SD 57103		7/25/2016
1010	Nancy Evelyn Hansmeier	12101 120th Avenue, Milaca, MN 56353		8/9/2016
1006	Jordyn Caresse Johnson	12204 Spring Canyon Rd., Whitewood, SD 57793		7/6/2016
1009	Sarah Nicole Jenness	628 6th Avenue, Sheldon, IA 51201		8/3/2016

Occupational Therapy Assistant License

Total 4

License Number	Name	Address	Specialty	Issue Date
359A	Sasha Anne Podhradsky	111 Sheridan Ave, Wagner, SD 57380		7/19/2016
360A	Monica Valentina Barker	309 E 3rd Ave , Andover, SD 57422		7/20/2016
361A	Shelby Rae Miller	808 Currant Drive, Pierre, SD 57501		8/23/2016
358A	Brooklynn Ann Urban	35347 239th St, Pukwana, SD 57370		7/1/2016

Occupational Therapy Assistant Temporary Permit

Total 1

License Number	Name	Address	Specialty	Issue Date
357A	Sasha Anne Podhradsky	111 Sheridan Ave, Wagner, SD 57380		6/9/2016

Paramedic License

Total 22

License Number	Name	Address	Specialty	Issue Date
2059	Elizabeth Diane Scharton	4521 E Ashbury Place #201, Sioux Falls, SD 57110		7/29/2016
2050	Matthew Carroll Gruchow	4521 E Ashbury Place, Apt. 102, Sioux Falls, SD 57110		7/18/2016
2063	Sandra Sue Smith	1221 4th Street NE, Sibley, IA 51249		8/8/2016
2052	Zachary Yashar Mesberg	1224 NE 75th Ave, Portland, OR 97213		7/18/2016
2071	Jason Peter Kirby	1714 4th St W, Williston, ND 58801		8/23/2016
2061	Mackenzie Leigh Morgan	1215 N. Roosevelt St. Apt#108, Aberdeen, SD 57401		8/4/2016
2053	Joseph Edward resch Pedersen	913 S. Newcomb Ave Apt 203, sioux falls, SD 57106		7/19/2016
2060	Eric Shawn Farmer	477 Robinson Drive, Hill City, SD 57745		8/3/2016
2069	Daryl Lloyd Michael	4025 LaCroix Court, Rapid City, SD 57703		8/16/2016
2070	Jessica Denise Tilberg	147 Surrey Ln, Custer, SD 57730		8/18/2016
2066	John Louis Beck	315 Yellowstone Ave., North, Alliance, NE 69301		8/15/2016
2067	Victoria Kay Black	204 Dennis Street, Monte Vista, CO 81144		8/16/2016
2043	Adam Caleb McClary	45023 277th St., Parker, SD 57053		6/8/2016
2057	Corey Alan Kempers	72 13th Ave. SE, Sioux Center, IA 51250		7/29/2016
2072	Cindy Rose Pratt	11909 Glacier Hwy #102, Juneau, AK 99801		8/24/2016
2058	Emily Jean Ward	1308 15th Ave S, Moorhead, MN 56560		7/29/2016
2044	Douglas William Fahn	28 Loftus Dr, Bella Vista, AR 72714		7/16/2016
2045	Kayla Marie Shaw	307 Cedar Lane, West Fargo, ND 58078		7/16/2016
2042	Reed Theodore Groth	334 38th Avenue East, West Fargo, SD 58078		6/1/2016
2048	Stuart Lee Cauthon	1108 Cedar Dr, Scott City, KS 67871		7/12/2016

2047	Patrick Vincent Lalla-Kraemer	477 Robinson Drive, Hill City, SD 57745	7/5/2016
2051	Jonathan Lloyd Lewis	217 4th Street South, Breckenridge, MN 56520	7/18/2016

Physical Therapist Assistant Certificate

Total 10

License Number	Name	Address	Specialty	Issue Date
0483	Jay Aaron Adelman	904 Pearl Avenue #201, Marshall, MN 56258		8/16/2016
0479	Tayla Ann Schulte	705 S 9th Street, Milbank, SD 57252		7/26/2016
0475	Kylie Lou Eckman	20015 462nd Ave., Bruce, SD 57220		6/7/2016
0476	Breanna Hope Zmolek	20128 445th Ave., Lake Preston, SD 57249		6/13/2016
0474	Chrystelle Anne Vail	720 Pheasant Circle, Tea, SD 57064		6/3/2016
0482	Austin Mark Behrens	47938 SD Hwy 48, Akron, IA 51001		8/10/2016
0478	Corrina Lee Steckelberg	506 Lakeport St., Salix, IA 51052		7/13/2016
0477	Amanda Alvina Wilkening	32961 120th St, Fulda, MN 56131		7/11/2016
0481	Ashley Lynn Wells	1106 Eagle Dr , Elk Point, SD 57025		8/5/2016
0480	Jessica Kelley McKenney	1200 3rd Ave, Mitchell, SD 57301		7/27/2016

Physical Therapist License

Total 20

License Number	Name	Address	Specialty	Issue Date
1939	Sierra Lynn Heeren	3925 Pointe West Place, Apt. 321, Rapid City, SD 57702		7/27/2016
1931	Sarah Teresa Irey			6/24/2016
1927	Jason Anthony Beilstein	4610 Meadowland Dr., Rapid City, SD 57703		6/2/2016
1933	Adam Scott Halseth	1463 Sage Ct, Shakopee, MN 55379		6/28/2016
1935	Jill Elizabeth Smolczyk	407 W. Clark St, Clarinda, IA 51632		6/30/2016
1930	Leslie Peter Kleinjan	1050 W Venture Place, Apt 283, Sioux Falls, SD 57105		6/13/2016
1932	Rachel Alyse Schmadeke	3638 5th St. Apt 311, Rapid City, SD 57701		6/24/2016
1944	Aaron Michael Willbrand	707 Cordes Street, O'Fallon, MO 63366		8/11/2016
1942	Lynn Marie Kious	24764 Highway 12, Westfield, IA 51062		8/3/2016
1938	Kristina Marie Goldstine	6533 S. Killarney Ct., Sioux Falls, SD 57108		7/27/2016
1926	Anne Marie Copeman	7909 S. Sunny Oak Circle, Sioux Falls, SD 57108		6/1/2016
1940	Lisa Marie Grandpre	1219 Plum Ln, Aberdeen, SD 57401		7/28/2016
1929	Sarah Lorraine Wattier	1447 Val Vista St, Sheridan, WY 82801		6/7/2016
1937	Hunter Ryan Anshutz	2023 David Cove , Brookings, SD 57006		7/27/2016
1934	Trena Marie Hardy	15470 Holbein Drive, Colorado Springs, CO 80921		6/29/2016
1928	Deming Charles Haugland	PO Box 945, Spearfish, SD 57783		6/7/2016
1945	Blake Douglas Wagner	2016 McDonald St , Sioux City, IA 51104		8/15/2016
1941	Jessica Ann Finke	2610 NE McKinley Street, Minneapolis, MN 55418		8/2/2016
1936	Han-Zhi Tao	1320 Lincoln Street, Vermillion, SD 57069		7/22/2016
1943	Katherine Ellen Sandknop	19401 Stacey Ct, Boonville, MO 65233		8/5/2016

Physician Assistant License

Total 8

License Number	Name	Address	Specialty	Issue Date
1041	Kevin John Conboy	23756 Arena Drive, Rapid City, SD 57702		6/2/2016
1044	Jane Marie Pierce-McPherson	4135 Prairieview Drive, Colstrip, MT 59323		7/21/2016
1047	David Anthony Tullar	6976 Carlyle Road, Woodbury, MN 55125		8/4/2016
1043	Aaron Louis Jackson	8332 NW 30 TERR J1000, Doral, FL 33122		7/5/2016
1046	Teresa Barajas Croft	1857 Glendale Blvd., Sioux City, IA 51105		8/1/2016
1048	Elizabeth Kay Price	15136 481st Ave., Milbank, SD 57252		8/23/2016
1042	Cory James Heiser	1326 Eastwood St. , Bismarck, ND 58504		7/5/2016
1045	Erica Leigh Boliek	8870 King Lear Ct, Fort Myers, FL 33908		7/25/2016

Physician Locum Tenens

Total 23

License Number	Name	Address	Specialty	Issue Date
1597	Tracy Lavern Evans, MD	140 Evergreen Drive, Lancaster, PA 17601	Surgery (General)	7/8/2016
1606	Hang Thanh Vu, MD	3033 Chimney Rock Road, Suite 519, Houston, TX 77056	Nephrology	6/21/2016
1607	Guillermo Emilio Noguera, MD	5473 Baldwin Park Street, Orlando, FL 32814	Internal Medicine (General)	6/23/2016
1608	Sudheer Reddy Muduganti, MD	2107 S. Washington Avenue, Marshfield, WI 54449	Internal Medicine (General)	7/1/2016
1610	William Wallace Ashley, MD	550 Thatcher Avenue, River Forest, IL 60305	Neurological Surgery	8/1/2016
1613	Laura Ann Peno-Green, MD	532 MANNING ROAD, Marietta, GA 30064	Pulmonology	8/1/2016
1616	Stephen Gerard Murphy, MD	78 Worthington Park Road, Newark, DE 19711	Surgery (General)	8/8/2016
1618	Joyce Wesley Fletcher, MD	820 East Cabot Street, Pierre, SD 57501	Dermatology	8/23/2016
1585	Matthew John Denti, DO	790 W. Pine Street, Wytherville, VA 24382	Obstetrics and Gynecology	6/7/2016
1601	Kirk Darwin Crouser, MD	1459 Hollow Tree Drive, Findlay, OH 45840	Internal Medicine (General)	6/6/2016
1609	Eric Edward Hansen, MD	2419 SW Pepperwood Road, Topeka, KS 66614	Physical Med. & Rehab.	7/8/2016
1589	Venkata S. Dandamudi, MD	1609 Banbridge Ct., Bakersfield, CA 93311	Neurology	6/1/2016
1600	Michael Gary Driver, MD	4688 S. Winsor Dr. , Springfield, MO 65619	Anesthesiology	7/22/2016
1603	Yousef Ebeid Tadros, MD	3025 Pointewest Dr., Augusta, GA 30909	Urology	6/2/2016
1604	Michael Allen Gooden, MD	4970 N. Camino Antonio, Tucson, AZ 85718	Vascular Surgery	6/9/2016
1605	Archana Goel, MD	2743 W. 139 Terrace, Leawood, KS 66224	Nephrology	7/11/2016
1599	Giovanni Maria Salerno, MD	5508 N. 4690 W. , Bourbonnais, IL 60914	Surgery (General)	6/1/2016
1612	Mark Daniel McCubbin, MD	13248 Rohn Road, Fenton, MI 48430	Nephrology	7/12/2016
1614	Maria Auxiliadora Incer-Obando, MD	905 Union St. Suite 11, Bangor, ME 04401	Endocrinology	8/1/2016

1611	Nicole Lee Plenty, MD	4004 Amberly Road, Montgomery, AL 36116	Obstetrics and Gynecology	7/20/2016
1615	Lisa Eugenia Hosea, MD	9014 SOUTH EUCLID AVENUE, Chicago, IL 60617	Internal Medicine (General)	8/8/2016
1617	Leon William Sweer , MD	410 Longmeadow Street, Mechanicsburg, PA 17055	Pulmonology	7/27/2016
1598	Ryan Patrick Brennan, MD	2301 9th St. Ct. NW, Gig Harbor, WA 98335	Neurological Surgery	6/11/2016

Resident License

Total 60

License Number	Name	Address	Specialty	Issue Date
289	Dominick Jacob Trombetta	1701 Taxville Rd., Apt. #03B, York, PA 17408	Psychiatry	6/20/2016
0279	Jesse Ray Van maanen	702 Carriage Hill, Apt. 3, Iowa City, IA 52246	Surgery (General)	6/25/2016
285	Chinedu Obinna Okeke	1135 West Lunt Avenue, Apt. 107, Chicago, IL 60626	Pathology	6/25/2016
284	Megan Lynn Wetzel	388 Shelburne Rd., Apt. 309, Burlington, VT 05401	Dermatology	6/25/2016
0303	Veronica Elizabeth Radigan	5641 S. Baldwin Ct., Sioux Falls, SD 57108	Psychiatry	6/20/2016
0338	Khalid Mohamed Ahmed	1400 West 22nd Street, Sioux Falls, SD 57105	Internal Medicine	8/11/2016
0316	Emily Elizabeth Gaster	400 N. Main Ave., Apt. 301, Sioux Falls, SD 57104	Other Specialties	6/25/2016
0310	Taylor John Slingsby	5445 Carriage Hills Dr., Rapid City, SD 57702	Internal Medicine (General)	6/25/2016
0333	Prince Sethi	Opposite Brass Market, Bawal Road, Rewari, 123401	Internal Medicine (General)	6/25/2016
287	Anthony Edward Ruzga	5908 S. Hallow Ave., Sioux Falls, SD 57106	Surgery (General)	6/25/2016
0335	Matthew Caleb Schafer	1010 S 54th St, Omaha, NE 68106	Emergency Medicine	7/25/2016
0337	Meghana Ram kunkala Helder	616 4th St. NW, Rochester, MN 55901	Thoracic Surgery	8/8/2016
0322	Ashley Renee Tiaht	2706 S. 40th St., Omaha, NE 68105	Family Medicine/General Practice	7/1/2016

280	Amanda Rae Schwenn Black	7105 Portland Avenue South, Richfield, MN 55423	Psychiatry	6/20/2016
0336	Radowan Ali Mahgoub Elnair	Obaid Khatm St., Khartoum, 11111	Internal Medicine (General)	8/1/2016
0321	Kathleen Anne Savio	622 W. Water St., Apt. A, Elmira, NY 14905	Family Medicine/General Practice	7/1/2016
282	Sara Renee Marroquin	62162 Crown Point Rd., Charleston, OR 97420	Surgery (General)	6/25/2016
0305	Na Lu Smith	924 Elm St., Vermillion, SD 57069	Other Specialties	6/25/2016
0277	Erik Lindy Peterson	5603 NW Hillside Drive, Kansas City, MO 64151	Psychiatry	6/20/2016
0298	Chloe Brooke Olson	3031 S. 70th St., Apt. 103, Omaha, NE 68106	Psychiatry	6/20/2016
288	Muthanna Yacoub	3013 Woodland Ave. #112, Des Moines, IA 50312	Family Medicine/General Practice	6/25/2016
0332	Mohammad Ahmed	20/1 28th Street, khayaban-e-shamsheer Phase 5 DHA Karachi, 75500	Internal Medicine (General)	6/25/2016
0299	George Allen Ceremuga	3812 Parkridge Circle, Rapid City, SD 57702	Other Specialties	6/25/2016
0331	Tou lee Xiong	2111 Nebraska Ave., Saint Paul, MN 55119	Family Medicine/General Practice	7/1/2016
292	Arwyn Grace Cunningham	2501 Town Hall Rd. NW, Bemidji, MN 56601	Pathology	6/25/2016
0330	Elizabeth Ann Tacl	2804 2nd Street SW, Apt. 325, Rochester, MN 55902	Surgery (General)	6/25/2016
0300	Joshua Michael Doorn	4412 E. Belmont St., Sioux Falls, SD 57103	Family Medicine/General Practice	6/25/2016
0304	Karsten Jon Rohlfs	3272 S. Pillsberry Ave., Apt. 3, Sioux Falls, SD 57103	Family Medicine/General Practice	6/25/2016
0319	Christopher Shane Wolf	3720 5th Ave., Sioux City, IA 51106	Family Medicine/General Practice	7/1/2016
281	Michael Jun Luckow	997 Vaughn St., Aurora, CO 80011	Family Medicine/General Practice	6/25/2016
0313	Adeem M. Abdulwahab	950 W. Venture Pl., Apt. 330, Sioux Falls, SD 57105	Family Medicine/General Practice	6/25/2016
0297	Katie Lynn Thompson	3519 S. 51st Ave., Omaha, NE 68106	Family Medicine/General Practice	6/25/2016

0320	Megan Eileen Meis	716 4th Ave. SE, Le Mars, IA 51031	Pediatrics (General)	6/25/2016
290	Richard Albert Vo	2400 Arlington Blvd. #B, Charlottesville, VA 22903	Pediatrics (General)	6/25/2016
0334	Kathleen Kelly Haight	5855 Woods Edge Rd., Fitchburg, WI 53711	Family Medicine/General Practice	7/15/2016
0312	Paul William Mallory	305 N. Dewberry, Sioux Falls, SD 57110	Other Specialties	6/25/2016
286	Ayodeji Gregorio Okusanya	5180 Opici Ct., Rancho Cucamonga, CA 91739	Psychiatry	6/20/2016
0291	Hollan Allen Harper	5520 Plymouth House, Meadville, PA 16335	Family Medicine/General Practice	7/1/2016
0314	Austin William Spronk	93 175th Ave., Edgerton, MN 56128	Family Medicine/General Practice	6/25/2016
0307	Taylor Marie Kapsch	6208 South Tomar Road, Sioux Falls, SD 57108	Family Medicine/General Practice	7/1/2016
0308	Kyle James Larson	1313 Tompkins Street, Rapid City, SD 57701	Family Medicine/General Practice	7/1/2016
0296	Kirsten Marie Schneider	2714 36th Ave. S., Apt. 201, Fargo, ND 58104	Pediatrics (General)	6/25/2016
0293	Whitney Marie Rolling	15773 85th Place North, Maple Grove, MN 55311	Pediatrics (General)	6/25/2016
0329	Alfred Henry Swanson	1553 Dewey Ct., Valdez, AK 99686	Family Medicine/General Practice	7/1/2016
0311	Joy Anna Mueller	614 E. Tallent St., Rapid City, SD 57701	Family Medicine/General Practice	7/1/2016
0301	Ann Palmer Hibbs	1123 Franklin St., Rapid City, SD 57701	Family Medicine/General Practice	7/1/2016
0325	Jessica Katlin Mackey	10000 Alameda Ave #125, Denver, CO 80247	Family Medicine/General Practice	6/25/2016
0324	Renuka Velisetty	2066 SW 37th St. Rd., Ocala, FL 34471	Psychiatry	6/25/2016
0328	Spencer David Schilling	3620 Rhode Island Avenue South, Saint Louis Park, MN 55426	Internal Medicine (General)	6/25/2016
0326	Elliot Michael Lawrence	305 Birch Briar Lane, Park Rapids, MN 56470	Internal Medicine (General)	6/25/2016
0302	Bradley Eugene Iverson	601 N. Phillips Ave. #109, Sioux Falls, SD 57104	Other Specialties	6/25/2016
0295	Valerie Norris	1351 Territory Drive, Bismarck, ND 58503	Pediatrics (General)	6/25/2016

0315	Miranda Jo Floen	719 N Duluth Ave, Sioux Falls, SD 57104	Pediatrics (General)	6/25/2016
0309	Akram Ahmed ibrahim Ahmed	17 Wilson Pl Apt 9, Belleville, NJ 07109	Surgery (General)	6/25/2016
0323	Steffanie Lyn Leslie	645 Gradelle Ave, Fairbanks, AK 99709	Pathology	6/25/2016
0317	Benjamin Dutton Meyer	1806 E. Sequoia Trail, Sioux Falls, SD 57103	Internal Medicine (General)	6/25/2016
0306	Joseph Mark Swedzinski	16127 270th St, Milroy, MN 56263	Family Medicine/General Practice	6/25/2016
0294	Chencheng Xie	1017 29th Ave SE, Apt C, Minneapolis, MN 55414	Internal Medicine (General)	6/25/2016
0318	Trey Davis Rogers	8008 W. Browning St., Sioux Falls, SD 57106	Internal Medicine (General)	6/25/2016
0327	Nielsen Howard Burns	304 East 8th Ave., Fort Pierre, SD 57532	Family Medicine/General Practice	6/15/2016

Respiratory Care Practitioner License

Total 22

License Number	Name	Address	Specialty	Issue Date
1113	Amber Lynn Wurdeman	10005 S. High Meadows Dr., Black Hawk, SD 57718		6/9/2016
1108	Jaylen Loren Osborne	2341 S Baldwin St, Sturgis, SD 57785		6/2/2016
1116	Cheyann Kay Kessler	1411 W Oliver St Apt 1, Spearfish, SD 57783		7/11/2016
1125	Ifrah Mohamed Abdi	300 N. Holly Ave. #115, Sioux Falls, SD 57104		8/18/2016
1126	Kallie Ann Brown	2900 S. 1st Ave., Sioux Falls, SD 57105		8/22/2016
1122	Alicia Mae Kratke	206 S 2nd Street, Homer, NE 68030		8/4/2016
1123	Anne Marie Bohan	9735 S. Schauppsville Rd., Wood River, NE 68883		8/11/2016
1112	Lindsey Elizabeth Oates	315 Arianna Place #2, Tea, SD 57064		6/9/2016
1106	Stephanie Erin Torkelson	432 Box Elder Road W, Box Elder, SD 57719		6/1/2016
1121	Emma Marie Johnson	1030 N Lincoln Ave #101, Madison, SD 57042		8/1/2016

1118	Jessica Rose Gifford	8746 W 32nd St #5, Sioux Falls, SD 57106	7/22/2016
1105	Logan Marie Herman	417 W Crawford, Luverne, MN 56156	6/1/2016
1120	Nicole Rae Grosshuesch	6216 W 66th Street, Sioux Falls, SD 57106	7/29/2016
1110	Ashley Fay Skaare	2310 5th St., Rapid City, SD 57701	6/7/2016
1114	Ana Kristine Hack	4251 Gramin Drive, Casper, WY 82609	6/22/2016
1109	Jessica Lynn Standerwick	2601 Augusta Street, Brandon, SD 57005	6/3/2016
1111	Lloyd David Thayne	355 W. Mesquite Blvd., D30-1011, Mesquite, NV 89027	6/7/2016
1124	Jordan Ann Wiedmann	1421 7th St. N., Fargo, ND 58102	8/18/2016
1119	Deanna Lea Parker	2227 Selma Dr., Wichita Falls, TX 76306	7/26/2016
1107	Christopher Shane Morrison	3808 SW 113th suite C., OKC, OK 73173	6/2/2016
1115	Eric Darrell Sampson	8009 Corn Mountain Place NW, Albuquerque, NM 87114	7/5/2016
1117	Shelby Clair Thomas	736 NE 1st St., Madison, SD 57042	7/14/2016

The SD Health Professionals Assistance Program Annual Update for the SD Board of Medical and Osteopathic Examiners

Midwest Health Management Services (MWHMS) is pleased to provide this annual report on the operations of the SD Health Professionals Assistance Program (HPAP). The South Dakota Health Professionals Assistance Program is dedicated to enhancing public safety and support for regulated health care professionals by facilitating the early intervention, treatment, continued care, and monitoring the safe return to practice for regulated health professionals who may be unable to practice with reasonable skill and safety if their mental health or substance use illness symptoms are not adequately managed.

Per SD CL 36-2A-3 MWHMS reports directly to the HPAP Program Service Committee (PSC). For the 2016 contract for service (6/1/15-5/31/16), HPAP formally met with the PSC on 12/15/15 to review and approve the FY 2017 contract for consultant services between MWHMS and the SD Department of Health, SD Board of Nursing, and Board of Medical and Osteopathic Examiners. The PSC also met on 7/21/16 to review program operations for the FY 2016 contract for services.

Per statute the duties of the program service committee include:

- (1) Establishing the annual health professionals assistance program budget and the pro rata share of program expenses to be borne by each participating board;
- (2) Determining the qualifications, duties, and compensation for program personnel;
- (3) Hiring program personnel, or contracting with entities;
- (4) Approving policies and procedures for the health professionals assistance program and providing guidance to the program personnel;
- (5) Annually approving members of the health professionals assistance program evaluation committees as outlined in this chapter;
- (6) Approving treatment facilities and services to which health professionals assistance program participants may be referred; and
- (7) Conducting an annual evaluation of the health professionals assistance program.

Program Service Committee Members include:

Maria Eining- SD HPAP Executive Director

Amanda McKnelly- SD HPAP Program Director

Craig Uthe, MD- HPAP Physician Advisor

Gloria Damgaard- Executive Director, SD Board of Nursing

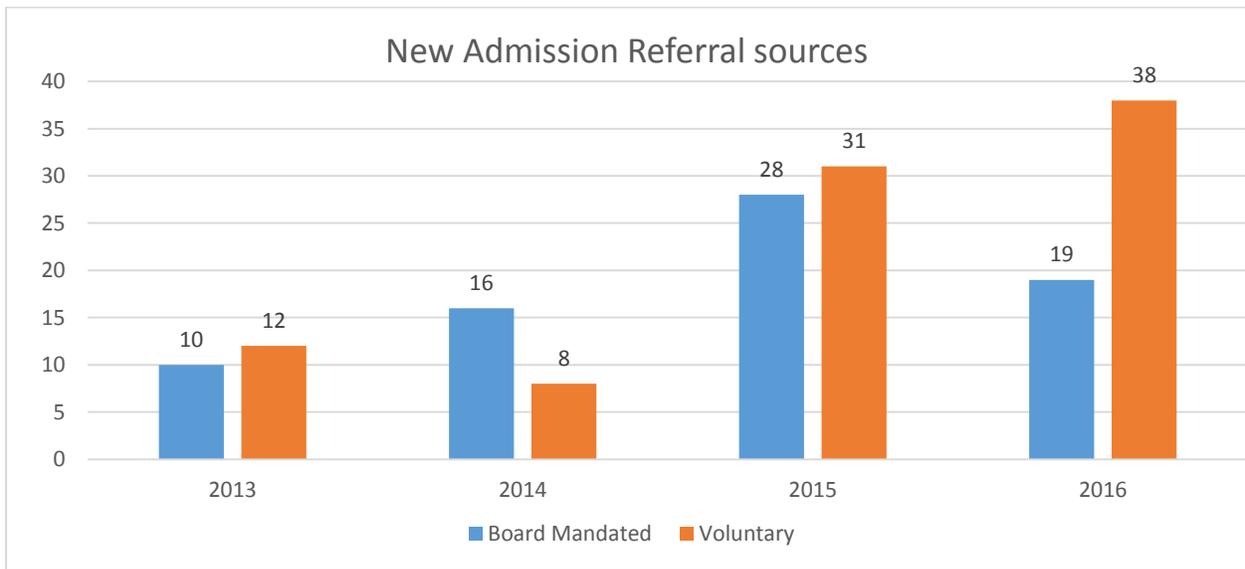
Margaret Hansen- Executive Director, SD Board of Medical and Osteopathic Examiners

Kari Shanard-Koenders- Executive Director, SD Board of Pharmacy

Brittany Novotny- Executive Director, SD Board of Dentistry

HPAP Participation, Presentations & Outreach

MWHMS is working to increase awareness of services for health care professionals. We seek to advance our mission of early intervention by increasing referrals prior to issues escalating to the level of Board intervention. In 2016 HPAP has provided written articles, numerous presentations to health care organizations, universities and treatment facilities and has provided consultation and support for health care organizations, community organizations and the legal system. Early intervention improves outcomes, support wellness and safe practice, and allows for alternatives to board intervention and discipline.



6/1/15 to 5/31/16 SD HPAP Participation and Utilization by Participating Board:

SD Licensing Board	2016 Admissions	2016 Discharges	2016 Inquiries	5/31/16 Active HPAP Participants
Nursing	51	29	18	102
BMOE	21	8	7	20
Pharmacy	0	2	0	4
Dentistry	0	0	1	4
Totals	72	39	26	130

In addition to active participation agreements, formal inquiries, and formal presentations, HPAP engagement supports the health care community by providing phone and meeting consultations with health-care organizations, law enforcement, professional associations, and college and university leaders and students, to provide education and guidance regarding illness, treatment, recovery, and decreasing stigma regarding seeking treatment for substance use and mental health issues.

HPAP Support Groups

HPAP coordinates several confidential support group meetings for health-care professionals seeking support from other health care professionals in recovery. These groups are facilitated by HPAP approved providers and are typically held twice per month. Currently there are four groups in the Sioux Falls area, one group in Rapid City.

- *New in 2016, MWHMS worked with providers to establish a HIPPA compliant HPAP on-line support group for individuals in rural areas.
- *Also new in 2016, is the addition of a Physician Support Group. This facilitated support group is available for any physician who is seeking supportive services and is available at no charge for licensed SD physicians.

EXECUTIVE SUMMARY FINANCIAL REPORT

TO: THE BOARD OF MEDICAL AND OSTEOPATHIC EXMINERS
FROM: MARGARET B HANSEN
DATE: August 24, 2016

1. The Board has three different locations of cash on hand (page 2)

- Petty Cash, Local Checking, and State Treasury Fund

	FY16	FY15	FY14
	06/30/2016	06/30/2015	06/30/2014
Total Cash	3,178,436	2,972,287	2,656,838

2. Upcoming Anticipated Expenses (page 3)

- Total anticipated expenses.

	FY16
Total Anticipated Expenses	2,236,548

3. Revenue (page 5)

- Total revenue for licensing, services, and other sources by line detail on the report.

	FY16	FY15	FY14
	06/30/2016	06/30/2015	06/30/2014
Total Revenue	1,354,969.04	1,307,603.35	1,256,516.60

4. Income Statement – review of expense variances (Pages 6 – 7)

		FY16	FY16	FY15	FY15
		Budgeted	06/30/2016	Budgeted	06/30/2015
4-A	5203040 – Air-State Owned – Instate <ul style="list-style-type: none"> Use of a state owned plane for meetings 	16,000	4,780	16,000	7,372
4-B	5203100 - Lodging Out-Of-State <ul style="list-style-type: none"> Hotel expenses for in state meetings or training attended 	500	7,671	500	3,977
4-C	5204160 – Workshop Registration Fee <ul style="list-style-type: none"> Registration fee for meetings or training attended 	2,000	2,978	2,000	4,656
4-D	5204530 - Telecommunication Services <ul style="list-style-type: none"> Board Member Laptop wireless Background Reports e.g. 	3,000	9,233	3,000	10,185
4-E	5205020 – Office Supplies <ul style="list-style-type: none"> Supplies for daily tasks in the office 	10,000	3,340	10,000	2,560
4-F	5205320 - Duplication – Private <ul style="list-style-type: none"> Printed pages from leased printers Licensure Cards ordered 	300	5,315	300	6,046

5. Income Statement – Total Expenses - (page 7)

Shows total expenses and budget comparison.

	FY16	FY16	FY15	FY15	FY14	FY14
	Budgeted	06/30/2016	Budgeted	06/30/2015	Budgeted	06/30/2014
Total Expenses	1,025,703	1,148,820	1,011,493	992,155	988,618	924,257

6. Income Statement - Net Income - (page 7)

Shows earnings measured by taking total revenue and minus expenses.

	FY16	FY16	FY15	FY15	FY14	FY14
	Budgeted	06/30/2016	Budgeted	06/30/2015	Budgeted	06/30/2014
Net Income	233,797	184,579	174,257	315,639	210,382	332,261

7. Other Contractual Services Breakdown by service description (page 8)

	FY16	FY15	FY14
	06/30/2016	06/30/2015	06/30/2014
Total Other Contractual Services	48,662	36,751	60,868

TO: SDBMOE BOARD MEMBERS
FROM: TYLER KLATT
SUBJECT: ADVISORY COMMITTEES
DATE: SEPTEMBER 8, 2016
CC:

ADVISORY COMMITTEE REPORT

- Provided for your information

ADVISORY COMMITTEE REAPPOINTMENTS

Advanced Life Support Committee

Paul Schueth (2nd term 2016 – 2019)

Tom Price (2nd term 2016 – 2019)

Athletic Trainer Committee

Tryg Odney (2nd term 2016 – 2019)

Occupational Therapy Committee

Mary El Karmassi (2nd term 2016 – 2019)

Barb Tarbox (3rd term 2016 – 2019)

Respiratory Therapy Committee

Tom Cahill (3rd term 2016 – 2019)

Mike Strubel (2nd term 2016 – 2019)

Advanced Life Support Committee did not meet

Athletic Trainer Committee met on August 2, 2016

1. Discussed committee member terms
2. Reviewed the renewal and reinstatement process
3. Discussed spouse/family member supervision

Genetic Counselor Committee met on August 8, 2016

1. Provided an update on the upcoming rules hearing
2. Discussed spouse/family member supervision

Physician Assistant Committee met on August 8, 2016

1. Introduced Clint Perman as the newest committee member
2. Provided an updated on the upcoming rules hearing
3. Discussed spouse/family member supervision

Occupational Therapy Committee met on August 9, 2016

1. Reviewed the Dept. of Social Services Medicaid manual and the concerns regarding payments
2. Reviewed a question regarding continuing education
3. Discussed spouse/family member supervision

Nutrition and Dietetics Committee met on August 10, 2016

1. Discussed the growing popularity of Certification of Nutrition Specialist
2. Discussed spouse/family member supervision

Physical Therapy Committee met on August 18, 2016

1. Discussed the Physical Therapy Interstate License Compact
2. Provided with an update on the progress of statute revision

Respiratory Therapy Committee did not meet

SDBMOE Financial Report

08/24/2016

for
07/01/15 - 06/30/16

Page	Report Name
2	Balance Sheet (Cash Only)
3	Upcoming Anticipated Expenses
4	Revenue Summary
6	Income Statement
8	Other Contractual Services

SDBMOE
Balance Sheet (Cash Only)

Date Range: July 1, 2015 - June 30, 2016

	FY16 06/30/2016	FY15 06/30/2015	FY14 06/30/2014	FY13 06/30/2013	FY12 06/30/2012	FY11 06/30/2011
Cash						
Petty Cash	100	100	100	100	100	100
Local Checking	2,276	2,034	3,598	2,930	4,223	4,712
State Treasury Fund	3,176,060	2,970,153	2,653,139	2,300,852	1,810,978	1,370,641
1. Total Cash	3,178,436	2,972,287	2,656,838	2,303,882	1,815,301	1,375,452

SDBMOE

Upcoming Anticipated Expenses

Expense Items:	Anticipated Amount:
Operating Expense Budget (with Salaries and Benefits)	\$ 1,025,703
Technology Update:	
Update Database - rework and implantation	\$ 400,000
Technical Support for Board Members Technology	\$ 12,000
Training Expenses (outside of budgeted amount in Operating Expenses)	
Investigator Training	\$ 2,345
Licensing Staff Training and Professional Certification	\$ 3,000
Attorney Training	\$ 2,500
Policy Training	\$ 1,000
Sending 4 Board Members to the annual FSMB Meeting	\$ 10,000
HPAP yearly support costs - projections for this year	\$ 200,000
Scanning paper files to an electronic format	\$ 10,000
Lawsuit reserve fund (for 3 large cases)	\$ 370,000
Compact Licensing Funding	\$ 200,000
2. Total Anticipated Expenses	\$ 2,236,548

SDBMOE
Revenue by Item Summary

Date Range: July 1, 2015 - June 30, 2016

Type	07/01/15 - 6/30/16 Amount	07/01/14 - 06/30/15 Amount	07/01/13 - 06/30/14 Amount
Licenses			
Athletic Trainer Application	\$ 4,200.00	\$ 3,400.00	\$ 3,000.00
Athletic Trainer Reinstatement	\$ -	\$ -	\$ -
Athletic Trainer Renewal	\$ 10,000.00	\$ 11,350.00	\$ 9,500.00
Advanced EMT for Instate Graduate	\$ 900.00	\$ 1,400.00	\$ 850.00
Advanced EMT for out of state Graduate	\$ 375.00	\$ 300.00	\$ 225.00
Advanced EMT Renewal	\$ 1,975.00	\$ 1,550.00	\$ 800.00
Advanced EMT Reinstatement	\$ 50.00	\$ 50.00	\$ -
ALS-I 85 Application for Instate Graduate	\$ 50.00	\$ 50.00	\$ -
ALS-I 85 Application for Out of State Graduate	\$ -	\$ 150.00	\$ 75.00
ALS-I 85 Renewal	\$ 2,625.00	\$ 3,850.00	\$ 3,625.00
ALS-I 99 Application for Instate Graduate	\$ -	\$ -	\$ -
ALS-I 99 Application for Out of State graduate	\$ -	\$ -	\$ -
ALS-I 99 Renewal	\$ 225.00	\$ 250.00	\$ 225.00
ALS-I 99 Reinstatement	\$ -	\$ -	\$ -
ALS-I85 Reinstatement	\$ 50.00	\$ 100.00	\$ 450.00
ALS-Paramedic Application for Instate graduate	\$ 1,400.00	\$ 1,300.00	\$ 1,850.00
ALS-Paramedic Application for Out of State Graduate	\$ 5,925.00	\$ 6,350.00	\$ 5,250.00
ALS-Paramedic Renewal	\$ 13,850.00	\$ 15,625.00	\$ 11,100.00
ALS-Paramedic Reinstatement	\$ 450.00	\$ 500.00	\$ 600.00
Genetic Counselor Temporary Application	\$ -	\$ 200.00	\$ 200.00
Genetic Counselor Application	\$ 7,800.00	\$ 3,800.00	\$ 1,600.00
Genetic Counselor Renewal	\$ 5,200.00	\$ 3,100.00	\$ 1,900.00
Licensed Nutritionist Application	\$ 3,570.00	\$ 1,610.00	\$ 1,750.00
Licensed Nutritionist Renewal	\$ 11,345.00	\$ 10,710.00	\$ 10,395.00
Temporary License Nutritionist Application	\$ 300.00	\$ 400.00	\$ 250.00
Licensed Nutritionist Reinstatement	\$ 300.00	\$ 300.00	\$ -
Locum Tenens Application	\$ 9,100.00	\$ 2,850.00	\$ 2,550.00
MD/DO Application	\$ 91,400.00	\$ 67,600.00	\$ 74,600.00
MD/DO Reinstatement	\$ 6,400.00	\$ 9,200.00	\$ 6,600.00
MD/DO-Renewals	\$ 778,400.00	\$ 746,600.00	\$ 729,400.00
Medical Assistant Application	\$ 870.00	\$ 840.00	\$ 1,000.00
Medical Assistant Renewal	\$ 2,760.00	\$ 20.00	\$ 2,720.00
Medical Assistant Reinstatement	\$ 220.00	\$ 40.00	\$ 300.00
Medical Corp Application	\$ 150.00	\$ 650.00	\$ 550.00
Medical Corp Reinstatement	\$ 1,100.00	\$ 700.00	\$ 1,000.00
Medical Corp Renewal	\$ 14,400.00	\$ 15,900.00	\$ 15,900.00
Occupational Therapist Application	\$ 1,950.00	\$ 1,750.00	\$ 1,950.00
Occupational Therapist Reinstatement	\$ 75.00	\$ 75.00	\$ 50.00
Occupational Therapy Assistant Application	\$ 1,100.00	\$ 1,050.00	\$ 850.00
Occupational Therapist Renewal	\$ 23,350.00	\$ 21,200.00	\$ 22,000.00
Occupational Therapy Assistant Reinstatement	\$ 50.00	\$ -	\$ -
Occupational Therapy Assistant Renewal	\$ 8,050.00	\$ 7,200.00	\$ 7,150.00
Occupational Therapist Limited Permit	\$ -	\$ 25.00	\$ 125.00
Occupational Therapy Assistant Limited License	\$ 25.00	\$ 25.00	\$ 75.00
Physical Therapist Application	\$ 4,680.00	\$ 5,040.00	\$ 3,900.00
Physical Therapist Renewal	\$ 47,950.00	\$ 44,800.00	\$ 43,900.00
Physical Therapist Reinstatement	\$ 200.00	\$ 600.00	\$ 150.00
Physical Therapist Assistant Application	\$ 2,880.00	\$ 2,880.00	\$ 1,980.00
Physical Therapist Assistant Renewal	\$ 14,150.00	\$ 12,050.00	\$ 12,050.00
Physical Therapist Assistant Reinstatement	\$ 100.00	\$ -	\$ 50.00
Physician Assistant Corporation Application	\$ 100.00	\$ -	\$ -
Physician Assistant Corporation Renewal	\$ 300.00	\$ 200.00	\$ 200.00
Physician Assistant Corporation Reinstatement	\$ 50.00	\$ -	\$ -
Physician Assistant Application	\$ 7,425.00	\$ 3,900.00	\$ 4,425.00
Physician Assistant Temporary Permit	\$ 50.00	\$ -	\$ 50.00
Physician Assistant Reinstatement	\$ 25.00	\$ 75.00	\$ 125.00
Physician Assistant Renewal	\$ 44,100.00	\$ 55,700.00	\$ 52,900.00
Resident License Application	\$ 3,100.00	\$ 3,300.00	\$ 3,800.00
Resident License Renewal	\$ 5,100.00	\$ 6,500.00	\$ 3,650.00
Respiratory Care Practitioner Application	\$ 3,900.00	\$ 2,175.00	\$ 3,225.00
Respiratory Care Temporary Application	\$ 720.00	\$ 520.00	\$ 520.00
Respiratory Care Practitioner Renewal	\$ 60.00	\$ 27,000.00	\$ 60.00
Respiratory Care Practitioner Reinstatement	\$ 95.00	\$ 190.00	\$ 95.00
NSF Check Board Fine	\$ -	\$ -	\$ -
USMLE Testing	\$ -	\$ -	\$ 3,150.00
Other Income	\$ -	\$ 190.00	\$ -
Total Licenses	\$ 1,144,975.00	\$ 1,107,190.00	\$ 1,054,695.00

SDBMOE
Revenue by Item Summary

Date Range: July 1, 2015 - June 30, 2016

		07/01/15 - 6/30/16 Amount	07/01/14 - 06/30/15 Amount	07/01/13 - 06/30/14 Amount
Other				
Interest Income	\$	33,911.28	\$ 24,236.35	\$ 30,177.73
Fines & Penalties	\$	-	\$ -	\$ -
Total Services	\$	33,911.28	\$ 24,236.35	\$ 30,177.73
Services				
Information Request	\$	-	\$ 30.00	\$ 30.00
Online Verifications	\$	128,282.76	\$ 128,857.00	\$ 118,256.00
Written Verifications	\$	47,190.00	\$ 46,620.00	\$ 47,940.00
Duplicate License Card	\$	610.00	\$ 670.00	\$ 1,020.00
Candian Service Fee (Skype Fee Charge)	\$	-	\$ -	\$ (2.13)
Mailing List				\$ 4,400.00
Total Services	\$	176,082.76	\$ 176,177.00	\$ 171,643.87
Total	3.	\$ 1,354,969.04	\$ 1,307,603.35	\$ 1,256,516.60

SDBMOE
Income Statement

Date Range: July 1, 2015 - June 30, 2016

	FY16 Budgeted	FY16 06/30/2016	% of Budget FY16	FY15 Budgeted	FY15 06/30/2015	% of Budget FY15	FY14 Budgeted	FY14 06/30/2014
Ordinary Income/Expense								
Income								
License Fee Revenue	1,089,000	1,130,005	104%	1,010,000	1,107,199	110%	1,012,000	1,054,695
Fines, Penalties, and other	0	0	0%	0	190	0%	0	0
Sales and Service Revenue	150,500	169,482	113%	150,750	176,177	117%	152,000	171,646
Total Income	1,239,500	1,299,487	105%	1,160,750	1,283,557	111%	1,164,000	1,226,341
Gross Profit								
	1,239,500	1,299,487	105%	1,160,750	1,283,557	111%	1,164,000	1,226,341
5101000 - Employee Salaries	300,801	335,577	112%	288,154	326,321	113%	277,412	308,612
5101030 - Board & Community Member Fees	3,418	2,460	72%	3,275	1,620	49%	3,154	2,520
5102010 - OASI	27,812	24,506	88%	26,392	23,656	90%	24,207	22,796
5102020 - Retirement	16,133	20,130	125%	16,133	19,332	120%	16,133	18,472
5102060 - Health Insurance	60,790	49,826	82%	60,790	65,024	107%	50,963	70,193
5102080 - Worker's Compensation	889	436	49%	889	261	29%	889	216
5102090 - Unemployment Insurance	42	97	230%	42	147	350%	42	99
5201030 - Board Member Per Diem	0	0	0%	0	0	0%	0	0
5203010 - Auto - State owned - Instate	0	765		0	396		0	0
5203030 - Auto - Private - Low Rate	0	684		0	988		0	423
5203030 - Auto - Private - High Rate	2,000	577	29%	2,000	278	14%	2,000	1,412
4-A 5203040 - Air- State owned- Instate	16,000	4,780	30%	16,000	7,372	46%	16,000	8,473
5203060 - Air-Commercial Carrier- Instate	0	0		0	5,565		0	582
5203070 - Air Travel - Charter Flights	30,000	10,325	34%	30,000	0	0%	30,000	3,750
5203100 - Lodging In-State	2,000	941	47%	2,000	323	16%	2,000	697
5203120 - Incidentals-Travel Instate	50	10	20%	50	72	144%	50	56
5203130 - Nonemployee Travel	0	1,078		0	491		0	8,827
5203140 - Taxable Meals	0	144		0	27		0	20
5203150 - Non-taxable meals In-state	600	377	63%	600	405	68%	600	353
5203230 - Auto - Private Out-of-state - High Rate	0	336		0	0		0	0
5203260 - Air-Commercial Out-of-state	1,100	7,231	657%	1,100	1,876	171%	1,100	1,795
5203280 - Other Public Out-of-state	100	388	388%	100	260	260%	100	150
4-B 5203300 - Lodging Out-Of-State	500	7,671	1534%	500	3,977	795%	500	3,653
5203320 - Incidentals - Out of State	0	391		0	25		0	50
5203350 - Out of State Meals	0	1,822		0	640		0	436
5204010 - Subscriptions	1,000	406	41%	1,000	90	9%	1,000	270
5204020 - Membership Dues	6,000	3,900	65%	6,000	4,425	74%	6,000	4,171
5204030 - Legal Document Fees	0	0		0	10		0	10
5204050 - Computer Consultant	0	124,550		0	47,970		0	70,980
5204080 - Legal Counsel	198,000	117,831	60%	198,000	78,008	39%	198,000	27,188
5204090 - Management Consultant	0	190,000		0	173,333		0	22,655
5204100 - Consultant Fees-Medical	13,500	12,600	93%	13,500	1,500	11%	13,500	1,750
5204110 - PR & Advertising Consultant	0	4,850		0	0		0	0
5204130 - Other Consulting	0	8,738		0	9,692		0	8,820
4-C 5204160 - Workshop Registration Fees	2,000	2,978	149%	2,000	4,656	233%	2,000	3,280
5204180 - State Computer Services	9,359	18,950	202%	9,359	17,810	190%	9,359	15,734
5204181 - BIT Development Costs	0	0		0	155		0	12
5204190 - Private Computer Services	0	0		0	0		0	0
5204200 - Central Services	3,531	5,761	163%	3,531	5,772	163%	3,531	3,709
5204202 - Property Management	0	24		0	307		0	317
5204203 - Purchasing Central Services	0	40		0	420		0	488
5204204 - Records Management	0	96		0	112		0	131
5204207 - Human Resource Services	0	4,006		0	3,931		0	3,454
5204220 - Equipment Maintenance	0	262		0	1,670		0	35,201
5204230 - Janitorial	0	0		0	0		0	0
5204250 - Cable TV (Office Internet)	0	755		0	830		0	695
5204320 - Audit Services - Private	5,500	0	0%	5,500	0	0%	5,500	0
5204340 - Computer Software Maint.	0	29		0	0		0	0
5204350 - Advertising - Magazines	0	4,675		0	2,750		0	2,750
5204360 - Advertising Newspapers	500	359	72%	500	1,255	251%	500	207
5204400 - Advertising Internet	500	0	0%	500	294	59%	500	0
5204460 - Equipment Rental	2,000	864	43%	2,000	960	48%	2,000	1,040
5204490 - Rents - Other	0	13,677		0	0		0	791
5204510 - Rents - Lease	83,000	68,381	82%	83,000	82,058	99%	62,000	51,160
4-D 5204530 - Telecommunication Services	3,000	9,233	308%	3,000	10,185	339%	3,000	15,418
5204550 - Garbage and Sewer	0	1,202		0	1,118		0	1,610
5204580 - Truck Drayage & Freight	0	3,275		0	2,095		0	857
5204590 - Professional Liability Insurance	20,000	1,216	6%	20,000	2,394	12%	20,000	2,400
5204620 - Taxes and License Fees	0	956		0	911		0	995
5204730 - Maintenance Contract	1,000	0	0%	1,000	0	0%	1,000	0
5204740 - Bank Charges	24,192	0	0%	24,192	0	0%	24,192	78
5204950 - Other Contractual Services	151,986	46,754	31%	151,986	43,306	28%	172,986	50,800
4-E 5205020 - Office Supplies	10,000	3,340	33%	10,000	2,560	26%	10,000	1,912
5205290 - Flags	0	0		0	209		0	0
5205040 - Educational & Instructional Sup	0	0		0	0		0	275
5205310 - State Printing	0	0		0	0		0	0
4-F 5205320 - Duplication - Private	300	5,315	1772%	300	6,046	2015%	300	1,142
5205340 - Supp. Public & Ref Material	0	185		0	185		0	0
5205350 - Postage	11,000	12,421	113%	11,000	15,171	138%	11,000	11,557
5205390 - Food Stuffs	100	0	0%	100	0	0%	100	280
5207121 - Building Improvement & Remodel	0	0		0	0		0	800
5207451 - Office Furniture & Fixtures	0	0		0	1,194		0	37,742
5207495 - Telephone Equipment	10,000	0	0%	10,000	76	1%	10,000	13,138
5207531 - Household Appliances	0	0		0	0		0	875
5207675 - Audio Visual Equipment	0	167		0	4,217		0	61,152
5207791 - Police and Security Equipment	0	0		0	0		0	0
5207901 - Computer Hardware (BIT)	0	2,420		0	5,175		0	3,468
5207905 - Computer systems	6,000	0	0%	6,000	0	0%	6,000	0
5207950 - Computer Software	0	0		0	0		0	0
5207961 - Computer Software (BIT)	1,000	0	0%	1,000	0	0%	1,000	1,089
5207980 - Depreciation Expense - Computer	0	0		0	0		0	0
5207965 - Software State Contract	0	0		0	0		0	0
5208080 - Prior Year Revenue Refund	0	8,000		0	0		0	0
5208210 - Interest on Late Vendor Payment	0	238		0	260		0	275
Total Expense	5,	1,025,703	112%	1,011,493	992,155	98%	988,618	924,257
Net Ordinary Income	213,797	150,667	70%	149,257	291,402	195%	175,382	302,084
Other Income/Expense								
Other Income								
4491000 - Interest Income	20,000	33,911	170%	25,000	24,236	97%	35,000	30,178
Total Other Income	20,000	33,911	170%	25,000	24,236	97%	35,000	30,178
Net Other Income	20,000	33,911	170%	25,000	24,236	97%	35,000	30,178
Net Income	6,	233,797	79%	174,257	315,639	181%	210,382	332,261

SDBMOE

Other Contractual Services

Date Range: July 1, 2015 - June 30, 2016

Description	FY16	FY15	FY14
	06/30/2016	06/30/2015	06/30/2014
Other Contractual Services			
Health Practitioners Assistance - HPAP	\$ -	\$ -	\$ 28,295
SDBON - CNP, CNM Co-regulation	\$ -	\$ -	\$ -
Investigator Contractor	\$ -	\$ -	\$ -
Investigations Expenses	\$ 8,345	\$ 4,625	\$ 1,521
Temporary Employment Services	\$ -	\$ -	\$ -
Other State Verifications	\$ -	\$ -	\$ -
Shredding	\$ -	\$ -	\$ -
Goods and Services	\$ -	\$ -	\$ -
Background Reports	\$ -	\$ -	\$ -
BD member Expenses	\$ 427	\$ 441	\$ 172
Board Meeting Audio	\$ -	\$ -	\$ -
Other	\$ 39,890	\$ 31,684	\$ 30,881
7. Total Other Contractual Services	\$ 48,662	\$ 36,751	\$ 60,868

File Number	Profession	Applicant or Licensee	Start Date	Status	Status Date	Board Member	Concern Category
14-099	MD/DO	Applicant	04/24/2014	Sept. 8, 2016 Board Meeting	06/02/2016	Landeen	Criminal
14-187	ALS	Licensee	08/08/2014	Recommendation	07/25/2016	Carlson	Criminal
14-193	MD/DO	Licensee	08/11/2014	Recommendation	08/24/2016	Carlson	Incompetency
15-019	MD/DO	Licensee	02/23/2015	ALJ Hearing TBD	07/13/2016	Lust	Unprofessional/Ethics
16-012	MD/DO	Licensee	07/20/2015	Investigation	08/24/2016	Carpenter	Unprofessional/Ethics
16-019	MD/DO	Licensee	08/11/2015	Sept 8, 2016 Board meeting	08/08/2016	Murray	Incompetency
16-045	MD/DO	Licensee	11/17/2015	Investigation	08/25/2016	Carlson	Unprofessional/Ethics/Incompetency
16-052	MD/DO	Licensee	12/11/2015	Investigation	08/24/2016	Murray	Unprofessional/Ethics/Incompetency
16-055	MD/DO	Licensee	01/01/2016	Investigation	06/15/2016	Pending	Unprofessional/Ethics
16-060	MD/DO	Applicant	01/20/2016	Investigation	06/07/2016	Landeen	Unprofessional/Ethics/Incompetency
16-064	MD/DO	Licensee	01/27/2016	Investigation	07/16/2016	Pending	Unprofessional/Ethics
16-069	MD/DO	Applicant	02/10/2016	Sept 8, 2016 Board meeting	06/22/2016	Rosario	Unprofessional/Ethics
16-082	MD/DO	Licensee	03/24/2016	Recommendation	08/23/2016	Carlson	Improper Sexual Interactions
16-086	PA	Licensee	04/01/2016	Investigation	07/26/2016	Pending	Unprofessional/ Ethics/ Incompetency
16-089	MD/DO	Licensee	04/05/2016	Investigation	07/22/2016	Pending	Unprofessional/Ethics
16-092	MD/DO	Licensee	04/13/2016	Investigation	06/30/2016	Pending	Unprofessional/Ethics
16-093	PA	Licensee	04/18/2016	Investigation	08/04/2016	Pending	Unprofessional/Ethics
16-094	MD/DO	Licensee	04/19/2016	Recommendation	08/08/2016	Landeen	Incompetency
16-097	MD/DO	Licensee	04/27/2016	September 8, 2016 Board Meeting	07/19/2016	Carlson	Unprofessional/Ethics
16-098	MD/DO	Licensee	04/27/2016	Investigation	08/25/2016	Pending	Incompetency
16-100	MD/DO	Applicant	05/05/2016	Investigation	08/23/2016	Pending	Incompetency/Improper Sexual Interactions
16-102	CNP	Licensee	05/09/2016	Investigation	08/25/2016	Pending	Incompetency
16-103	MD/DO	Applicant	05/12/2016	Investigation	08/10/2016	Pending	Unprofessional/Ethics
16-107	MD/DO	Licensee	05/18/2016	Investigation	07/28/2016	Pending	Unprofessional/Ethics
16-108	MD/DO	Licensee	05/18/2016	Investigation	07/28/2016	Pending	Unprofessional/Ethics
16-109	MD/DO	Applicant	05/26/2016	Investigation	08/22/2016	Pending	Unprofessional/Ethics/Incompetency
16-111	MD/DO	Licensee	06/06/2016	Investigation	08/10/2016	Pending	Unprofessional/Ethics
16-112	CNM	Licensee	06/06/2016	September 8, 2016 Board Meeting	08/11/2016	Lindbloom	Incompetency
16-113	MD/DO	Licensee	06/08/2016	Investigation	08/23/2016	Pending	Incompetency
16-116	MD/DO	Licensee	06/09/2016	Investigation	08/11/2016	Pending	Unprofessional/Ethics
16-119	EMTSS	Applicant	06/14/2016	September 8, 2016 Board Meeting	08/25/2016	Admin	Criminal
16-121	MD/DO	Applicant	06/21/2016	Investigation	08/25/2016	Pending	Unprofessional/Ethics
16-123	MA	Applicant	06/23/2016	Investigation	08/10/2016	Pending	Criminal
16-124	MD/DO	Licensee	06/23/2016	Investigation	08/10/2016	Pending	Unprofessional/Ethics
17-003	CNP	Applicant	07/05/2016	Investigation	08/16/2016	Pending	Substance Abuse/Criminal
17-006	MD/DO	Licensee	07/07/2016	Investigation	08/12/2016	Pending	Unprofessional/ Ethics/ Incompetency
17-007	MD/DO	Licensee	07/07/2016	Investigation	07/28/2016	Pending	Unprofessional/Ethics
17-008	MD/DO	Applicant	07/07/2016	Investigation	08/10/2016	Pending	Unprofessional/Ethics/Incompetency
17-014	MD/DO	Licensee	07/25/2016	Investigation	07/25/2016	Pending	Unprofessional/Ethics
17-015	MD/DO	Licensee	07/25/2016	Investigation	08/04/2016	Pending	Unprofessional/Ethics/Competency
17-018	MD/DO	Applicant	08/05/2016	Investigation	08/10/2016	Pending	Unprofessional/Ethics/Incompetency
17-019	MD/DO	Applicant	08/05/2016	Investigation	08/16/2016	Pending	Unprofessional/Ethics/Incompetency
17-022	MD/DO	Licensee	08/09/2016	Investigation	08/23/2016	Pending	Incompetency
17-023	MD/DO	Licensee	08/10/2016	Investigation	08/23/2016	Pending	Incompetency
17-024	MD/DO	Applicant	08/19/2016	Investigation	08/19/2016	Pending	Incompetency

THE BOARD OF MEDICAL AND
OSTEOPATHIC EXAMINERS OF THE
STATE OF SOUTH DAKOTA

IN THE MATTER OF)	NO. 16-119
THE APPLICATION OF:)	
Anthony Lund,)	FINDINGS OF FACT AND
)	CONCLUSIONS OF LAW
Respondent.)	
)	

This matter came on for hearing before the undersigned hearing examiner on July 22, 2016 pursuant to the Petition to Board of Medical and Osteopathic Examiners wherein it was requested that Anthony Lund’s application for Advanced Life Support - Student Status be denied. The South Dakota Board of Medical and Osteopathic Examiners, hereinafter “Board”, appeared by and through their counsel, William Golden. Executive Director of the Board, Margaret B. Hansen, was also present on behalf of the Board. Mr. Lund appeared personally and was not represented by counsel.

The Board presented Exhibits 1 – 5 which were received into evidence and are a part of the record. Mr. Lund testified on his own behalf. At the conclusion of the testimony, the parties made brief closing statements.

Based upon the entirety of the record before the undersigned, the undersigned hereby submits the following:

FINDINGS OF FACT

1. Anthony Lund submitted an application for Advanced Life Support – Student Status on January 12, 2016. (Exhibit 1, Pages 3 – 7.) On the

application, Mr. Lund disclosed having been charged with misdemeanor DWIs in 1998, 1999, 2000 and a third offense felony DWI in early, 2006. (Exhibit 1, Page 5.)

2. A Record Search Report from the South Dakota Unified Judicial System revealed that Mr. Lund had pled guilty to a third offense DWI charge in Minnehaha County, South Dakota and was sentenced on said charge on March 29, 2006. (Exhibit 2, Page 9.)
3. On January 13, 2016, Randi Sterling, Licensing Specialist for the South Dakota Board of Medical and Osteopathic Examiners, notified Mr. Lund by electronic mail and regular mail that he was ineligible for Advanced Life Support – Student Status for two reasons;
 - a. Mr. Lund had not yet interviewed with a program and was not tentatively accepted to a program.
 - b. Mr. Lund had a felony conviction making him ineligible for eventual licensure.

(Exhibit 3, Pages 11 -12.)

4. On January 21, 2016, Mr. Lund filed an appeal letter with the South Dakota Board of Medical and Osteopathic Examiners which contained information concerning his DWI offenses. (Exhibit 5, Pages 13-27.)
5. At the time of submitting his application on January 12, 2016, Mr. Lund had not been tentatively accepted in an approved Advanced Life Support training program.
6. At the time of his application, Mr. Lund had not completed Emergency Medical Technician basic training as he had not taken the National

Registry Test to certify his completion of basic training. (Hearing Transcript Pages 27-28.)

7. Mr. Lund does not believe that he has an alcohol problem and did not complete alcohol treatment after his felony DWI conviction. (Hearing Transcript Page 28-29.)

Based upon the foregoing Findings of Fact, the undersigned does hereby make the following:

CONCLUSIONS OF LAW

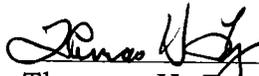
1. SDCL 36-4B-6 and SDCL 36-4B-31 permits the Board of Examiners to refuse to grant a license upon satisfactory proof of the person's incompetence or unprofessional or dishonorable conduct as defined in SDCL 36-4-30 or proof of a violation of SDCL Chapter 36-4B.
2. SDCL 36-4B-6 requires an applicant seeking Advanced Life Support – Student Status to have successfully completed Emergency Medical Technician basic training. Mr. Lund should not be granted Advanced Life Support – Student Status in that he has not satisfactorily completed Emergency Medical Technician basic training.
3. SDCL 36-4B-6 requires an applicant for Advanced Life Support – Student Status training to have been tentatively accepted in an approved Advanced Life Support training program. Mr. Lund's application for Advanced Life Support – Student Status should be denied in that he has not been accepted into an approved Advanced Life Support training program.

4. SDCL 36-4B-6 requires an applicant for Advanced Life Support – Student Status to be of good moral character. Mr. Lund’s felony conviction for a DWI and his failure to acknowledge an alcohol problem fails to meet the standard for good moral character under SDCL 36-4-30 and as a result, Mr. Lund’s application for Advanced Life Support – Student Status should be denied.
5. Any item designated herein as a Finding of Fact which is more appropriately deemed a Conclusion of Law, shall be deemed a Conclusion of Law. Any item contained herein which is identified as a Conclusion of Law and which is more appropriately deemed a Finding of Fact, shall be deemed a Finding of Fact.

RECOMMENDATION

Based upon the entirety of the record herein, it is recommended that Anthony Lund’s application for Advanced Life Support – Student Status in the State of South Dakota be denied by the South Dakota Board Medical and Osteopathic Examiners.

Dated this 20th day of August, 2016.



Thomas H. Kriebel
Hearing Examiner

SOUTH DAKOTA BOARD OF MEDICAL
AND OSTEOPATHIC EXAMINERS

* * * * *

IN THE MATTER OF: * TRANSCRIPT OF
THE APPLICATION OF * HEARING
ANTHONY LUND *

* * * * *

BEFORE: Mr. Thomas H. Frieberg,
Hearing Examiner
PO Box 511
Beresford, SD 57004

APPEARANCES: Mr. William H. Golden
Assistant Attorney General
317 North Main Avenue
Sioux Falls, SD 57104

Attorney for the South Dakota
Board of Medical and Osteopathic
Examiners Staff.

ALSO PRESENT: Ms. Margaret B. Hansen, PA-C, MPAS
Executive Director
South Dakota Board of Medical and
Osteopathic Examiners

Ms. Misty Rallis
Board Investigator
South Dakota Board of Medical and
Osteopathic Examiners

PROCEEDINGS: The above-entitled matter came on
for hearing on the 22nd day of
July, 2016, commencing at the hour
of 9:30 a.m. at the Conference
Room of the South Dakota Board of
Medical and Osteopathic Examiners,
Sioux Falls, South Dakota.

INDEX TO WITNESSES

	Direct	Cross	Redirect	Recross
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FOR THE BOARD:

MISTY RALLIS

By Mr. Golden 11

ANTHONY LUND

By Mr. Golden 20

Board rests:

Opening Statement by Mr. Golden: 10

Closing Statement by Mr. Golden: 34

* * * * *

INDEX TO EXHIBITS

BOARD EXHIBITS

NUMBER	DESCRIPTION	MKD	OFFRD	RULED ON
1	License Application	3	13	13
2	UJS Record Search Report	3	15	16
3	BMOE email and Letter, 1/13/16	3	17	18
4	BMOE Appeal with Handwritten letter	3	18	18
5	Lund court documents	3	19	19

APPLICANT EXHIBITS

None marked.

Original transcript and exhibits provided to the
South Dakota Board of Medical and Osteopathic
Examiners.

1 (Board Exhibits 1-5 marked for
2 identification.)

3 HEARING EXAMINER FRIEBERG: We'll go on the
4 record, then. Good morning. My name is Tom
5 Frieberg. I've been appointed to act as a
6 hearing examiner in this matter. We are here
7 today in the matter of the application of Anthony
8 Lund who's filed an application for Advanced Life
9 Support Student Status. This is Board of Medical
10 and Osteopathic Examiners File Number 16-119.

11 Mr. Lund, I'm going to make some
12 preliminary comments to advise you of the process
13 of the hearing today and also as to your rights
14 as they are affected by what happens at the
15 hearing today and going forward as well. The
16 board is required by its various laws in
17 South Dakota Codified Laws Title 34 and SDCL
18 1-26-27 to conduct contested case proceedings for
19 application, licensure, and disciplinary actions.
20 These proceedings take different forms when they
21 come to the board. South Dakota Administrative
22 Rule 20:78:05:04 provides that the board may have
23 a proceeding conducted by a hearing examiner. My
24 job as hearing examiner is to be responsible for
25 presiding over the evidentiary hearing and

1 proposing a recommended decision to the board to
2 be decided at a future board meeting. The
3 recommended decision sets forth proposed findings
4 of fact, conclusions of law, and a recommended
5 order.

6 A contested case proceeding is initiated by
7 the filing of a Petition and a Notice For
8 Hearing. SDCL 1-26-9.2 allows discovery in like
9 manner as a civil proceeding. This permits the
10 applicant and staff to discover the information
11 known to the opposing party prior to the hearing.

12 Prehearing motions may be filed and are
13 handled prior to the contested case hearing. I'm
14 not aware of any prehearing motions that have
15 been filed by either party in this case.

16 Mr. Lund, you've been notified that you have
17 the right to appear for the contested case
18 hearing and you're personally present here today.
19 You also have the right to be represented by
20 counsel at this hearing and you have
21 determined -- or decided to proceed without the
22 assistance of an attorney today. Is that
23 correct?

24 ANTHONY LUND: Correct.

25 HEARING EXAMINER FRIEBERG: You also have

1 the opportunity to respond to the allegations and
2 to produce evidence on your own behalf, to
3 present witnesses, to cross-examine witnesses,
4 and to examine and respond to any documents
5 introduced at the hearing. These and other due
6 process rights will be forfeited if not exercised
7 at the hearing today.

8 Contested case proceedings require that the
9 respondent or applicant is entitled to a hearing
10 before a body that has not participated in the
11 investigation. As a result, the board does not
12 conduct the investigations in matters that come
13 before them for consideration. That is the
14 function of staff.

15 The board is prohibited from communicating
16 with the staff regarding any investigation that
17 is likely to become a contested case hearing
18 pursuant to SDCL 1-26-26. Further, this law also
19 prohibits the board members from communicating
20 directly or indirectly with any person or any
21 party about matters coming before them for a
22 decision. Further, the staff cannot forward
23 information it receives from board members.

24 According to the board's rules contained in
25 the Administrative Rules 20:78:03:06 and

1 20:78:04:03, a board member's routinely assigned
2 to assist the staff in the investigation. If a
3 board member assisted the staff in this case, he
4 or she may not participate in the board's
5 decision or in the board vote or ruling at a
6 future board meeting.

7 Mr. Golden, were there any board members
8 assisting in the investigation of this matter?

9 MR. GOLDEN: There was not. This is
10 considered an administrative determination by the
11 staff and so there was not a board member.

12 HEARING EXAMINER FRIEBERG: So what that
13 means, Mr. Lund, is all of the board members will
14 be eligible at the future board meeting to
15 participate in the decision. If they had
16 assisted in the investigation, they would be
17 disqualified for participating in the decision at
18 that time.

19 Today's contested case hearing will proceed
20 as follows: First, each party beginning with
21 Mr. Golden on behalf of the board and then you,
22 Mr. Lund, will have the opportunity to make an
23 opening statement. An opening statement is not
24 evidence but should address the position taken by
25 each party and what decision they are requesting

1 from the board. Then each party, beginning with
2 Mr. Golden on behalf of the board, and then you,
3 Mr. Lund, may call witnesses and present evidence
4 in accordance with SDCL 1-26-19.

5 Once the evidentiary portion of the hearing
6 is closed, the parties, beginning with
7 Mr. Golden, and then you, Mr. Lund, may present
8 closing arguments.

9 After closing arguments are complete and the
10 hearing is concluded, I will take the matter
11 under consideration and submit proposed findings
12 of fact and conclusions of law in a proposed
13 recommendation to the board. Both the board and
14 you, Mr. Lund, will receive a copy of the
15 proposed decision. You may file objections
16 within 20 days after receipt of the proposed
17 findings of fact, conclusions of law, and
18 recommendation.

19 All evidence entered into the record during
20 this contested case hearing will be provided to
21 the board at a future board meeting in accordance
22 with the Rules of Evidence.

23 The board is provided with and reads the
24 pleadings, the transcript of the evidentiary
25 hearing, and the documents or exhibits submitted

1 into evidence at the hearing. Pursuant to SDCL
2 1-26-19 and 1-26-24, when I conduct the contested
3 case hearing, the board may make its decision
4 entirely on the record. However, the board has
5 traditionally allowed the parties a chance to
6 present an oral argument with respect to the
7 proposed recommendation that I make to the board.

8 As the respondent, Mr. Lund, you have the
9 right to appear at the board meeting when the
10 proposed decision is presented. There's no
11 requirements that you attend or address the board
12 at a future board meeting and no presumption is
13 attached to your desire to either attend or not
14 attend to address the board. It is entirely up
15 to you as to whether or not you wish to attend
16 and/or present an oral argument or address the
17 board at a future meeting.

18 At the board meeting, the board may make a
19 decision immediately or they may enter into
20 executive session for deliberations under the
21 contested case provisions of SDCL Chapter 1-26
22 and the board may consult with our separate
23 counsel under SDCL 1-25-2(3). After an executive
24 session is concluded, the hearing will re -- will
25 be reconvened in public session and the board

1 will make its ruling.

2 The board may accept, reject, or accept with
3 revisions, amendments, or conditions the hearing
4 examiner's recommendation, recommended decision
5 to affirm, modify or modified action previously
6 taken, or to direct the action, direct the taking
7 of a new action, all within the scope of the
8 matter before them at authorized by 1-26-25.

9 Once the board has made its decision, you
10 have a right to appeal the decision to the
11 South Dakota Circuit Court and ultimately to the
12 South Dakota Supreme Court as provided by
13 South Dakota statutes.

14 Before we proceed, are there any
15 preliminarily matters that need to be addressed
16 by either party?

17 MR. GOLDEN: Nothing for the staff.

18 HEARING EXAMINER FRIEBERG: Do you have any
19 questions about the proceedings today, Mr. Lund,
20 or your rights?

21 ANTHONY LUND: No.

22 HEARING EXAMINER FRIEBERG: So as I
23 indicated, we'll proceed with the board will
24 present their case first -- or give the board an
25 opportunity to make an opening statement first if

1 they choose to do so.

2 Mr. Golden, did you want to make an opening
3 statement?

4 MR. GOLDEN: I believe it's laid out in the
5 petition that we're going to present. It will be
6 very factual concerning the misdemeanor
7 convictions and the felony conviction that the
8 board, staff typically sends an ineligible letter
9 out to the individual. It is the applicant's
10 burden to show good moral character and is
11 typically interpreted with an individual with a
12 felony, per se, is showing that it is not --
13 they're not able to show good moral character if
14 they have a felony on their record.

15 However, under our statutes, it's a may, so
16 an applicant can show and overcome that
17 presumption. And I believe that's what we're
18 here today, to see if the applicant can go ahead
19 and present and has the burden in order to show
20 he has good moral character and that the felony
21 is not indicative of his moral character.

22 HEARING EXAMINER FRIEBERG: Mr. Lund, did
23 you want to make any opening statement or did you
24 want to wait and just present testimony at the
25 appropriate time during the proceeding?

1 ANTHONY LUND: I can just wait.

2 HEARING EXAMINER FRIEBERG: With that,
3 Mr. Golden, do you want to call your first
4 witness?

5 MR. GOLDEN: Yes, Your Honor. It would be
6 Misty Rallis.

7 **MISTY RALLIS,**

8 called as a witness at 9:38 a.m., being first
9 duly sworn, testified as follows:

10 BY MR. GOLDEN:

11 Q. Would you please introduce yourself.

12 A. My name is Misty Rallis, it's M-i-s-t-y
13 R-a-l-l-i-s, and I am the board investigator for
14 the South Dakota Board of Medical and Osteopathic
15 Examiners.

16 Q. Would you briefly just explain your educational
17 history?

18 A. I attended the University of South Dakota. I am
19 a registered nurse and I've also attended
20 certified medical board investigator training.

21 Q. Are you currently licensed as a registered nurse?

22 A. I am.

23 Q. How long have you worked for the South Dakota
24 Medical Board?

25 A. A little over two years.

1 Q. What is your job description as an investigator
2 for the South Dakota Medical Board?

3 A. As an investigator, I investigate the complaints
4 and investigations that come in through either
5 the complaint process or the application process
6 certificates. I am assigned to collect the
7 documents pertaining to anything that may come up
8 during the investigation or through the
9 application process.

10 Q. Okay. And how did you come into contact with
11 Mr. Lund?

12 A. This came to me through the application process.

13 Q. And why was that?

14 A. When Mr. Lund submitted his application for his
15 Advanced Life Support Student Status, he reported
16 three misdemeanor DUIs and a felony DUI.

17 Q. I'm now showing you what's been marked as
18 Exhibit 1. Do you recognize what that is?

19 A. Yes. Exhibit 1 is Mr. Lund's application that
20 was submitted January 12th, 2016, for Advanced
21 Life Support Student Status.

22 Q. How is that application submitted?

23 A. It is submitted online.

24 Q. Okay. And so this is a printed copy of it?

25 A. Correct.

1 Q. Is it a true and accurate representation of the
2 application?

3 A. Yes.

4 MR. GOLDEN: I would offer Exhibit 1 at this
5 time.

6 (Exhibit 1 offered.)

7 HEARING EXAMINER FRIEBERG: Mr. Lund, do you
8 have any objections to Exhibit 1 coming into the
9 record in this proceeding?

10 ANTHONY LUND: No, sir.

11 HEARING EXAMINER FRIEBERG: Exhibit 1 will
12 be received.

13 (Exhibit 1 received.)

14 Q. When you say that there was a report of
15 misdemeanors on Mr. Lund's application,
16 specifically what did he disclose?

17 A. Mr. Lund reported he answered yes to Question
18 Number 8, have you been subject to a criminal or
19 civil complaint, investigation, or proceeding
20 other than a minor traffic offense. His answer
21 was yes, misdemeanor DWIs in '98, '99, 2000;
22 third offense felony in early 2006.

23 Q. Did you do a follow-up investigation?

24 A. After Mr. Lund submitted his application, I
25 requested a record report from the South Dakota

1 Unified Judicial System.

2 Q. Why did you do that?

3 A. To see what came back on the criminal history
4 from that report.

5 Q. Okay. Was it consistent with what Mr. Lund
6 reported?

7 A. On the report that came back, it has the third
8 offense DUI from 2006. The charges from '98, '99
9 and 2000 were not on that report.

10 Q. Is that unusual?

11 A. No.

12 Q. Could those charges be from other jurisdictions?

13 A. Yes.

14 Q. What does your report cover?

15 A. This report covers the South Dakota convictions
16 only so it wouldn't be any other state.

17 Q. Okay. After that, what did you do?

18 A. After that, Mr. Lund was sent a letter by our
19 licensing specialist to notify him of his
20 ineligibility for student status.

21 Q. And that would have been marked -- or was the
22 South Dakota judicial report -- or UJS report
23 marked as Exhibit 2?

24 A. Yes.

25 Q. Do you have a copy of that with you here today?

1 A. Yes.

2 Q. Have you reviewed that?

3 A. Exhibit 2?

4 Q. Yes.

5 A. Yes.

6 Q. Is that true -- does that accurately reflect the
7 report that you ran?

8 A. Yes.

9 Q. And contains the information that you testified
10 to?

11 A. Yes.

12 MR. GOLDEN: I'd offer Exhibit 2 at this
13 time.

14 (Exhibit 2 offered.)

15 HEARING EXAMINER FRIEBERG: Mr. Lund, did
16 you have any objections to Exhibit 2 being
17 received into the record?

18 ANTHONY LUND: No, I don't.

19 (Exhibit 2 received.)

20 HEARING EXAMINER FRIEBERG: And just so
21 we're clear, you received a copy of the exhibits
22 from Mr. Golden?

23 ANTHONY LUND: Yes.

24 HEARING EXAMINER FRIEBERG: And have had a
25 chance to review them?

1 ANTHONY LUND: Yes.

2 HEARING EXAMINER FRIEBERG: Exhibit 2 will
3 be received.

4 (Exhibit 2 received.)

5 Q. You have Exhibit 3 in front of you at this time,
6 Ms. Rallis?

7 A. Yes.

8 Q. Exhibit -- what is Exhibit Number 3?

9 A. Exhibit Number 3 is the letter that was sent to
10 Mr. Lund regarding his ineligibility for student
11 status. It was e-mailed and mailed, so there's a
12 copy of the e-mail and of the letter that was
13 sent.

14 Q. You mentioned student status. The application
15 that was sent in was for student status?

16 A. Yes.

17 Q. Student status for what?

18 A. Advanced Life Support.

19 Q. What is student status?

20 A. Student status is granted to students who are
21 tentatively accepted into an Advanced Life
22 Support program. It allows them to complete
23 their ride-alongs through the program and also to
24 take their examinations at the end of the
25 program.

1 Q. Okay. The ineligibility letter, is that a
2 standard business document of the South Dakota
3 Medical Board?

4 A. Yes.

5 Q. Why is it sent?

6 A. It was sent to notify Mr. Lund of his
7 ineligibility and to give him an opportunity to
8 appeal.

9 Q. Okay. And what was -- what did the letter
10 identify as his ineligibility?

11 A. The letter identified that he had not yet
12 interviewed with a program so he had not been
13 tentatively accepted, which you have to be
14 tentatively accepted to qualify for student
15 status, and it also notified him that the felony
16 conviction would be ineligible for eventual
17 licensure.

18 MR. GOLDEN: I would offer Exhibit Number 3
19 at this time.

20 (Exhibit 3 offered.)

21 HEARING EXAMINER FRIEBERG: Mr. Lund, do you
22 have any objection to Exhibit 3 coming into the
23 record?

24 ANTHONY LUND: No, I don't.

25 HEARING EXAMINER FRIEBERG: Exhibit 3 will

1 be received.

2 (Exhibit 3 received.)

3 Q. Do you have Exhibit 4 in front of you?

4 A. I do.

5 Q. Would you briefly describe what that document is?

6 A. Exhibit Number 4 was provided to the board office
7 by Mr. Lund. It is him appealing the decision of
8 ineligibility.

9 Q. Okay. And is that a true and accurate
10 representation of what was received by the --
11 that you received?

12 A. Yes.

13 Q. Is that --

14 I would offer Exhibit Number 4.

15 (Exhibit 4 offered.)

16 HEARING EXAMINER FRIEBERG: Mr. Lund, do you
17 have any objection to Exhibit 4 being received as
18 part of the record today?

19 ANTHONY LUND: No, I don't.

20 HEARING EXAMINER FRIEBERG: Exhibit 4 will
21 be received.

22 (Exhibit 4 received.)

23 Q. After you received the UJS report, did you go
24 ahead and contact the court system and obtain any
25 other documents?

1 A. I did not obtain any other documents. Mr. Lund
2 provided the court documents from his
3 third-offense DUI on the same date that he
4 provided his appeal for the ineligibility.

5 Q. Has that been marked as Exhibit Number 5?

6 A. Yes.

7 MR. GOLDEN: We'd offer Exhibit Number 5 at
8 this time.

9 (Exhibit 5 offered.)

10 HEARING EXAMINER FRIEBERG: Mr. Lund, did
11 you have any objection to Exhibit 5 as being
12 received as part of the record today?

13 ANTHONY LUND: No, I don't.

14 HEARING EXAMINER FRIEBERG: Exhibit 5 will
15 be received.

16 (Exhibit 5 received.)

17 Q. What was -- Strike that. Did that complete your
18 investigation?

19 A. Yes.

20 MR. GOLDEN: I have no further questions.

21 HEARING EXAMINER FRIEBERG: Mr. Lund, you
22 have an opportunity to ask any questions that you
23 may have of Ms. Rallis at this time.

24 ANTHONY LUND: I don't have any.

25 HEARING EXAMINER FRIEBERG: You don't have

1 any questions?

2 ANTHONY LUND: No, sir.

3 HEARING EXAMINER FRIEBERG: Okay.

4 (Whereupon, the witness was excused at 9:46 a.m.)

5 HEARING EXAMINER FRIEBERG: Mr. Golden, do
6 you have any other witnesses?

7 MR. GOLDEN: I'd call Mr. Lund at this
8 point.

9 HEARING EXAMINER FRIEBERG: You want to step
10 up here, Mr. Lund.

11 **ANTHONY LUND,**

12 called as a witness at 9:47 a.m., being first
13 duly sworn, testified as follows:

14 BY MR. GOLDEN:

15 Q. Mr. Lund, would you please introduce yourself to
16 the hearing examiner?

17 A. Anthony Lund.

18 Q. Would you -- where did you go to school at?

19 A. O'Neill, Nebraska.

20 Q. What level -- did you go to high school?

21 A. Yes.

22 Q. Where did you go?

23 A. I went to high school O'Neill, Nebraska, and then
24 after that, I went to the military, started my
25 criminal justice degree while I was in, never

1 continued it when I got out.

2 Q. What branch of the military?

3 A. Air Force --

4 Q. How long --

5 A. -- and Army.

6 Q. I'm sorry. How long were you in with the
7 Air Force?

8 A. Just under three years.

9 Q. And then you said you were in with the Army?

10 A. Yes.

11 Q. How long were you enlisted with the Army?

12 A. I was dual.

13 Q. Dual?

14 A. I went to -- I was an Air Force cop and then was
15 accepted into Army Ranger school so I did the
16 schooling but I was still Air Force.

17 Q. Okay. And you talked about being -- so you were
18 military police when you were in the Air Force?

19 A. Yes.

20 Q. And did you receive a discharge at some point?

21 A. Yes, I did.

22 Q. What was that discharge?

23 A. General under honorable conditions.

24 Q. And after that, you had mentioned that you
25 received some -- or you went to college?

1 A. I did that while I was in through the Air Force's
2 college.

3 Q. Do you remember -- so do you remember what
4 college that was or?

5 A. I want to say it was just the community college
6 of the Air Force. I think that's what it was but
7 it was through couple other different ones. We
8 just had it on base and they just had a couple
9 classes.

10 Q. Did you receive a degree?

11 A. No, I didn't.

12 Q. Okay. Could you give the hearing examiner a
13 rough description of what type of classes you
14 took or how many units?

15 A. So long ago. I don't remember the units. I know
16 a bunch of the college credit courses came
17 through when I went to my military police
18 schooling. I think a lot of them were just the
19 generals that were added on.

20 Q. Okay. And when did you enlist?

21 A. In November of '94.

22 Q. Okay. And when were you discharged?

23 A. May of '97.

24 Q. When you were discharged, what did you do after
25 that?

1 A. Got out, came back to the states, and started
2 work as a farmer.

3 Q. When you say come back to the states, where were
4 you prior to coming back to the states?

5 A. My last year was in Kusan Air Base, South Korea.

6 Q. And which state did you come back to?

7 A. Nebraska.

8 Q. And what were you doing there?

9 A. I was farming.

10 Q. Could you give us a little bit of your history of
11 your employment?

12 A. Came back. I was farming, farmed for about a
13 year and a half and then I lost my license. My
14 boss was willing to work around that and I said I
15 didn't want to be a burden, so I quit that job
16 and got a job at a feed mill that was eight
17 blocks away so I could walk back and forth from
18 work.

19 Q. And you were still in Nebraska?

20 A. Yes.

21 Q. And so that would have been approximately
22 1998-99?

23 A. Yes.

24 Q. Why did you lose your license?

25 A. From the second DUI.

1 Q. Now, you understand we're here to address two
2 issues: One, is your student status and being in
3 a program, and the second part is the DWIs.

4 A. Yes.

5 Q. So could you explain a little bit about how these
6 DWIs came about, the first one?

7 A. How they came about or?

8 Q. Here's -- here's what I'm asking you or what I'd
9 like you to address for the hearing examiner, is
10 you have some DWIs on your record, right?

11 A. Yes.

12 Q. And the last one was 2006?

13 A. Yes.

14 Q. Could you just explain, give us some insight into
15 why you think you picked up those DWIs and why
16 they stopped?

17 A. Okay. I got out of the military. I was, I still
18 call it young and immature and had an ego, and
19 drinking was a way of life and it carried on.
20 And after the third one -- actually the second
21 one I learned. The third one was a hangover one,
22 was hungry and I went to McDonald's. I thought I
23 was still sober. Apparently not, because they
24 pulled me over because they knew I wasn't -- I
25 didn't have my license. And I don't know, I

1 barely blew over on that one. And after that, I
2 stopped drinking and then moved to Sioux Falls.
3 And one night, just out, I didn't think I had
4 that much, thought the time thing, and I gambled
5 and it didn't pay off. So after that, I quit
6 drinking at all. I don't go to the bars, don't
7 do anything.

8 Q. Okay. Now, I just heard you say you were driving
9 without a license?

10 A. Yes.

11 Q. Could you explain that, why you were doing that?

12 A. Didn't have any food. It was a hangover thing
13 and just wanted greasy, just wasn't thinking. It
14 was early in the morning, thought I could make it
15 the mile to McDonald's and back.

16 Q. As a licensed professional, you're required to
17 follow rules of ethics as well as the laws that
18 will pertain to you if you were given a license.
19 Can you understand how it might be an issue that
20 if you didn't have a license but yet you still
21 drove could be an issue for the board and whether
22 or not you're able to follow the ethical
23 requirements and the legal requirements?

24 A. Yes.

25 Q. Do you want -- would you like an opportunity to

1 try to explain why that's not an issue or would
2 you like to address it?

3 A. I look at it as that was almost 20 years ago.
4 I've grown up, matured, had a steady job for
5 almost 11 years now and I've learned. The
6 biggest thing is I actually grew up.

7 Q. Where have you been working?

8 A. At Hancock Concrete.

9 Q. And what do you do there?

10 A. I am the field technician. I drive out to job
11 sites and I fix issues with the contractors if
12 they have an issue with the product or I fix the
13 product. And I also do part of the work at the
14 plant.

15 Q. Okay. When you say "plant", what do you mean?

16 A. We make concrete fixtures for storm water drains
17 anywhere from the type alongside of the street or
18 the boxed culverts that go underneath the
19 highways and manholes.

20 Q. What has made -- why have you decided to look at
21 education as a paramedic?

22 A. Because I'm getting too old for doing
23 construction and I just want to do something
24 better with my life. I want to -- I tried to get
25 on to the Sioux Falls Police Department until I

1 found out about their felony clause so I backed
2 out on that. And then paramedic sounded good so
3 I started off. I knew the felony was going to be
4 an issue so I got ahold of the national registry,
5 asked them if it was going to be a problem, and
6 they said it's a good chance that I'll be able to
7 get through so I went into the EMT school on a
8 hope.

9 Q. Are you currently enrolled in EMT school, or EMT?

10 A. I already did that the month of January.

11 Q. You say -- what do you mean by "that"? Are you
12 talking about basic training?

13 A. EMT basic.

14 Q. Okay. And have you gone through that program?

15 A. Yes, I have.

16 Q. And how did that go?

17 A. I passed.

18 Q. So are you now -- do you have a certificate from
19 them as a basic?

20 A. No, I haven't -- or I have one through the
21 school. I just haven't taken the National
22 Registry Test, which the national registry I
23 submitted the court -- what are these, the court
24 documents of my felony and did their appeal
25 process and they approved of it so I can take the

1 National Registry Test.

2 Q. But you haven't taken it at this time?

3 A. No, I haven't.

4 Q. Okay. And you understand one of the requirements
5 for getting into paramedic school is to be
6 certified as a basic?

7 A. Yes.

8 Q. So you haven't completed that process at this
9 time?

10 A. Not yet.

11 Q. After your 2006 DWI, did you go ahead and have
12 any alcohol evaluations?

13 A. Yes, I did, right before I went in and they said
14 I didn't have an alcohol problem.

15 Q. Okay. Would you agree with them that you didn't
16 have an alcohol problem?

17 A. Yes.

18 Q. Okay. Now, you understand when I ask that
19 question, I'm setting you up for the next one.

20 A. I know.

21 Q. So you know what the next question coming is? If
22 you have four DWIs out there, do you think you
23 have a problem?

24 A. No, I don't.

25 Q. Why?

1 A. Because the first three back to back, that was --
2 I'd say there was a borderline problem because
3 the third one, that was just poor choice on
4 driving and then I stopped. The fourth one, poor
5 moment of choice. And after that, I was just,
6 like, done, there's no sense in gambling, it only
7 gets worse. So I didn't need help on quitting.
8 I was able to just walk away and walk away from
9 all my friends who didn't support that choice
10 that I made.

11 Q. Okay. So you did not go through treatment after
12 your third DWI?

13 A. No.

14 Q. Have you done any AA or anything else?

15 A. I did the 24/7 program from when I first was
16 arrested until my court date which was, I think
17 end of April, end of March.

18 Q. Okay. Do you have any documentation, do you have
19 any way of outside corroboration that you don't
20 drink at this time?

21 A. No, I don't.

22 Q. Can you think of any way that you could verify
23 that?

24 A. I could get statements from a couple coworkers or
25 my wife.

1 Q. Is there anything else you would like to tell the
2 hearing examiner?

3 A. Oh, on the being not accepted into the program, I
4 did not know about the South Dakota Board --
5 yeah, their part in the student status, so as
6 soon as I found out about that during EMT classes
7 when I started the application to get the ball
8 rolling, because I knew I'd probably have to do
9 an appeal and I guess I've been just waiting
10 because I applied then even before I passed just
11 so -- yeah, I can get it going. I just want to
12 get that out there. I think that's it.

13 MR. GOLDEN: Okay. I have no further
14 questions.

15 HEARING EXAMINER FRIEBERG: Do you have any
16 other witnesses, Mr. Golden?

17 MR. GOLDEN: I do not.

18 (Whereupon, the Board rested at 10:01 a.m.)

19 HEARING EXAMINER FRIEBERG: Mr. Lund, I know
20 Mr. Golden has asked you some questions. He has
21 no other witnesses he plans to call. This is
22 your opportunity to testify on your own behalf or
23 to call any witnesses that you may wish to call
24 to testify on your behalf. And it's a little --
25 that's a little awkward. I'm not expecting you

1 to ask yourself questions and then answer them,
2 but if there's any statements that you want to
3 make that might not have been addressed during
4 the questioning from Mr. Golden, this is your
5 opportunity to make those statements on the
6 record and under oath today.

7 ANTHONY LUND: Okay. I don't think so. I
8 think you covered everything. I'm not trying to
9 hide anything. I guess it's just my word where
10 I've grown up and moved past that stage of my
11 life.

12 HEARING EXAMINER FRIEBERG: Just so I'm
13 clear, you have not taken the National Registry
14 Test; is that correct?

15 ANTHONY LUND: No, I haven't.

16 HEARING EXAMINER FRIEBERG: Have you signed
17 up to take that test?

18 ANTHONY LUND: Yes, I have.

19 HEARING EXAMINER FRIEBERG: When did you
20 plan to take that?

21 THE WITNESS: Oh, I took it, I want to say
22 March.

23 HEARING EXAMINER FRIEBERG: Oh, you did take
24 the test?

25 ANTHONY LUND: Yes. I took the first one

1 and I didn't pass one of the five areas so I have
2 to retest, but with my job, it's pretty much
3 impossible being able to know when I can retest
4 so that's been an issue on just my schedule
5 redoing it. But I can -- even if I get in
6 trouble at work, I'll just not show up for work,
7 I guess, if it means that much to take the test
8 because I'm the only one that does my job so I
9 don't have a schedule, so. But the test isn't an
10 issue. One way or another, I'll get it done.

11 HEARING EXAMINER FRIEBERG: Then my other
12 question is to clarify, you're not currently
13 enrolled in any educational program?

14 ANTHONY LUND: No. My hopes were to go from
15 EMT school, which was a month long and then start
16 up paramedic which started the first week -- is
17 it in here? Oh, the first week of February. I
18 want to say it was, like, the 6th it started, but
19 that already went by.

20 HEARING EXAMINER FRIEBERG: And how long is
21 that program?

22 ANTHONY LUND: I want to do the night one
23 and that was a year.

24 HEARING EXAMINER FRIEBERG: And have you
25 made application to that program?

1 ANTHONY LUND: I did, and they denied me
2 because of my appeal process.

3 HEARING EXAMINER FRIEBERG: This appeal
4 process?

5 ANTHONY LUND: Yes. They thought it would
6 be unfair for me to start the school and then not
7 knowing if I was going to be accepted for student
8 status or not. As far as I know, I can get --
9 get in pending this.

10 HEARING EXAMINER FRIEBERG: You don't have
11 anything from the school with you today that
12 verifies that?

13 ANTHONY LUND: No, I don't.

14 HEARING EXAMINER FRIEBERG: I don't know if
15 that prompted any other questions from you,
16 Mr. Golden.

17 MR. GOLDEN: It did not.

18 HEARING EXAMINER FRIEBERG: Mr. Lund,
19 anything else that you want to address as the
20 evidentiary part of the hearing today?

21 ANTHONY LUND: No, sir.

22 HEARING EXAMINER FRIEBERG: Okay. You can
23 come back over here. And you don't have any
24 other witness, you said?

25 ANTHONY LUND: No, I don't.

1 HEARING EXAMINER FRIEBERG: Well, that will
2 conclude the evidentiary portion of the hearing
3 today.

4 Mr. Golden, did you want to make any closing
5 argument?

6 MR. GOLDEN: Very briefly, Your Honor.
7 Mr. Lund clearly is ineligible for student status
8 at this point because he hasn't completed the
9 requirements for basic. And if he completes and
10 completes the test, he is still in the situation
11 where he has to show -- he has to be able to
12 convince a program to accept him and that hasn't
13 occurred at this point in time. So before he can
14 get student status, he has to get into a program.

15 Now, I understand that may be a chicken and
16 egg problem for him because, with the felony on
17 his record, this appeal process as it is, if the
18 felony is not addressed, the program is unlikely
19 at that point in time or it may be a barrier to
20 him because they're not going to be sure if the
21 board would allow him student status with the
22 felony on his record.

23 The -- previously the South Dakota Medical
24 Board has posted guidelines concerning
25 convictions and licensees, and there is a

1 recommendation on the website that sets forth
2 that if an individual has Class 1 misdemeanors,
3 they should inquire of the board and staff about
4 licensing.

5 Typically felonies are a disqualifier for
6 the board. That -- concerning the statute and
7 the case law, which I believe is set out in the
8 South Dakota Medical Board, v Katz and Benton is
9 it's a may. An individual -- it may bar an
10 individual if they have a felony. But with an
11 applicant, one of the things they have to show is
12 good moral character, and our South Dakota
13 Supreme Court has said that specifically in Katz
14 and then addressed it in Benton, that a felony
15 may be a bar because felonies in and of
16 themselves are a sign of bad moral character to
17 have committed a crime at that level. So it is
18 incumbent on Mr. Lund to be able to convince the
19 board that even though he has a felony on his
20 record, that he can be law abiding, because in
21 the overall hierarchy, criminal law is the
22 basis -- basic lowest level of acceptable
23 behavior before the state will step in and take
24 some type of corrective action in leading up to
25 and confining them and removing them from

1 society.

2 Above that, we're getting to ethics, and
3 this board mainly addresses ethical issues which
4 are typically more gray and more difficult for
5 individuals. So the board looks to a licensee
6 and initially says, do you have good moral
7 character, are you a person who has high moral
8 standards and will meet those professional
9 requirements. And so a felony by its nature
10 falls well below ethical requirements, and it is
11 a demonstration that that person has had a lapse.

12 Now, everyone can make a mistake and they
13 can get a pardon or appeal. The courts can grant
14 a suspended imposition of sentence and remove
15 that, and once it's sealed, that would remove at
16 least one of those barriers, but at this point in
17 time, Mr. Lund is in that position whereas if he
18 completes basic, which hasn't been accomplished
19 so initially he's not eligible for licensure or
20 student status because he doesn't have his basic.

21 If he gets his basic, he has to get into a
22 program. However, that program may look at the
23 board and say, are you going to allow him to get
24 student status with a license with a felony on
25 his record. So he is in a situation there that

1 if that issue isn't addressed, then he won't be
2 able to proceed into a program, because if the
3 program takes him into it and he proceeds far
4 enough along where he has to have student status
5 to do the clinical side and he's denied student
6 status, then the time and effort of him going to
7 school would be lost and the school is reluctant
8 to put a person in that situation.

9 So at this point, I believe that the
10 evidence that we have is we have a history of
11 multiple years from 1998 to 2006, roughly an
12 eight-year period, where Mr. Lund himself is
13 telling us that he was immature. We have
14 behavior where he's talking about driving without
15 a license. And I don't know that we saw insight
16 into the fact that he wasn't allowed to do that,
17 that if he hadn't just followed the rules at that
18 point, he wouldn't have picked up his next DWI.
19 And so these are the things that we look at to
20 see whether or not somebody has good moral
21 character is, one, can you follow the basic rules
22 of society, because we're going to expect that if
23 you're going to hold a professional license,
24 there are ethical requirements that exceed what
25 just merely society will accept and punish his

1 criminal behavior. And so I'm afraid that the
2 insight that we see there may be lacking at this
3 point.

4 It was also concerning when he testified to
5 the fact that if he had to not fulfill his
6 obligation to his employer, that he would skip it
7 because this is more important to him. And, once
8 again, we're really addressing the issue of
9 character, and those are the type of things that,
10 are you going to show up, are you going to be
11 professional in the way you conduct yourself.
12 And so I understand he may have been offering
13 that and showing how much he really wishes to
14 pursue this, but he is also at the same time
15 saying I'm going to neglect an obligation
16 potentially that I've accepted.

17 So for those reasons, one, I think that he's
18 just flat out not eligible because he hasn't
19 completed basic, he hasn't been accepted into the
20 program. I believe that when it comes to being
21 able to show that he has good moral character,
22 his testimony today did not help himself. He
23 would have benefited, I believe, if he was able
24 to demonstrate with some witnesses or some
25 documents that he'd taken some corrective steps

1 to prevent the issue with alcohol, but even
2 setting that aside, because I haven't addressed
3 that much, we really want to know, can he follow
4 the rules, can he be an ethical person, can he be
5 somebody that, once he's licensed, meets high
6 ethical standards, because when you go into the
7 medical profession, you deal with people -- the
8 most honorable people, you're given access to
9 very powerful drugs, and you're expected at that
10 point in time to exercise extremely good judgment
11 and ethical behavior. And I just didn't hear
12 that at this point, and he has the presumption --
13 he has to meet that burden. And he already
14 starts off in a hole with these convictions and
15 so I don't believe with the evidence that is
16 before the hearing examiner at this time that
17 he's met those requirements. Thank you.

18 HEARING EXAMINER FRIEBERG: Mr. Lund, did
19 you want to make any closing remarks before we
20 finish today?

21 ANTHONY LUND: I just want to state that I
22 didn't mean it in a bad way that I would skip out
23 on work to show up and take it, because that can
24 be looked at both ways. I have tried my best on
25 this. I don't really -- I came in here blinded,

1 didn't understand how I could show and prove
2 morals, how I could prove that I had straightened
3 myself around without any documentation, but
4 right now my job is important and that's why I
5 had to look into all this before I started the
6 program so I knew what I was getting into. And,
7 like I said, this was a little hiccup that I
8 didn't know about the board. Otherwise, I
9 probably wouldn't even have went to the EMT basic
10 class. I don't have anything else.

11 HEARING EXAMINER FRIEBERG: Okay. Thank
12 you. That will conclude the hearing today. As I
13 indicated earlier, Mr. Lund, I will be making a
14 proposed recommendation of findings of fact,
15 conclusions of law and a recommended decision
16 that will be presented to the board at a future
17 meeting. You'll receive a copy of my recommended
18 decision and you'll have an opportunity to
19 present yourself to the board when it reviews
20 your case and makes a determination based upon my
21 recommended decision. That won't be an
22 evidentiary hearing like today. That will be
23 simply an opportunity for you to address the
24 board with any statements that you feel support
25 your position that the application for student

1 status should be granted.

2 ANTHONY LUND: Okay.

3 HEARING EXAMINER FRIEBERG: With that, we'll
4 conclude the hearing.

5 MR. GOLDEN: Thank you.

6 HEARING EXAMINER FRIEBERG: Thank you,
7 Mr. Lund.

8 * * *

9 (Whereupon, the proceedings concluded at 10:16
10 a.m., 7-22-16.)

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1 STATE OF SOUTH DAKOTA)

CERTIFICATE

2 COUNTY OF MINNEHAHA)

3 I, Suzanne Brudigan, Registered
4 Professional Reporter and Notary Public within
and for the State of South Dakota:

5 DO HEREBY CERTIFY that the witness was
6 first duly sworn by me to testify to the truth,
7 the whole truth, and nothing but the truth
8 relative to the matter under consideration, and
that the foregoing pages 1-41, inclusive, are a
true and correct transcript of my stenotype notes
made during the time of the taking of the
deposition of this witness.

9 I FURTHER CERTIFY that I am not an
10 attorney for, nor related to the parties to this
action, and that I am in no way interested in the
outcome of this action.

11 In testimony whereof, I have hereunto set
my hand and official seal this 26th day of July,
12 2016.

13
14 _____
Suzanne Brudigan, Notary Public

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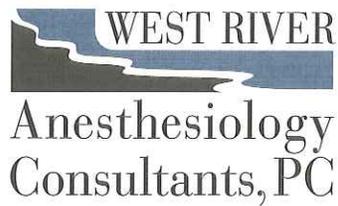
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August 26, 2016

Margaret Hansen, PA-C, MPAS
Executive Director
South Dakota Board of Medical and Osteopathic Examiners
1010 N. Main Ave., Ste. 301
Sioux Falls, SD 57104

Re: South Dakota Administrative Rules – Proposed Changes
Comment Period September 3, 2016

Dear Ms. Hansen:

Our group provides anesthesiology and chronic pain management services. The chronic pain management services are provided in conjunction with Regional Rehabilitative Institute in Rapid City. While we support the documentation guidelines, we do have concerns as follows:

1. We are concerned that an unintended consequence of these guidelines will be a retraction by any provider not trained in pain management from prescribing opioids for chronic pain. This will create a significant burden on our practice to prescribe chronic opioids for an even larger patient population than we currently service. We can't carry this burden alone, and yet this proposal will subject us to tremendous pressure to do just that.
2. The Federation of State Medical Board sites optimum practice of a consult with an addiction specialist before opioid therapy is initiated if the patient has a history of substance use disorder. Western South Dakota does not have an addiction physician specialist making this guideline in the Federation's policy unworkable in our rural, isolated area.
3. We are also interested in soliciting your feedback regarding patients that we have been treating for chronic pain, in some cases for years that are on a stable dose of opioid medications with no aberrant behavior. These patients have signed agreements with our practice and submit to urine drug screens. While we are in the process of updating the patient's charts to the proposed standards, it will take some time to complete all the recommended steps. Do you have any ideas on how best to transition these long time patients to current guidelines?

Thank you for your careful consideration of the impact these proposed rules will have in Western South Dakota.

Sincerely,

A handwritten signature in cursive script that reads "The Physicians of West River Anesthesiology".

The Physicians of West River Anesthesiology Consultants, PC

631 St. Anne St., Suite 102
Rapid City, SD 57701
p: 605-343-1333
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SOUTH DAKOTA
COUNCIL OF SUBSTANCE ABUSE DIRECTORS, Inc.
2520 East Franklin Street
Pierre, South Dakota 57501

August 30, 2016

Margaret B. Hansen, PA-C, MPAS, Executive Director
South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Avenue, Ste. 301
Sioux Falls, South Dakota 57104

Dear Ms. Hansen:

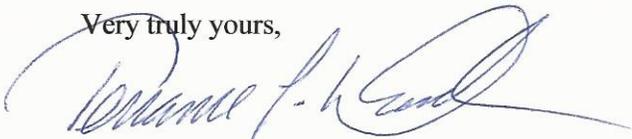
This is provided to present comment regarding the South Dakota Board of Medical and Osteopathic Examiners proposed rules to create standards for medical record documentation when prescribing opioids for chronic pain.

The South Dakota Council of Substance Abuse Directors is a non-profit association representing fifteen organizations that provide comprehensive alcohol/drug treatment and prevention services. I've included a copy of our membership roster for your clarification. Our system has witnessed a significant and growing problem with abuses, addictions, and overdoses related to prescription opioids. While the issue in South Dakota has not reached the proportions and severity experienced in other areas of the country, the ongoing trend is of great concern and tremendous public health importance. Accordingly, we strongly support the Board's efforts to enact standards that best assure the appropriate prescription and use of such medications.

As regards ARSD Section 20:47:07:01, we believe that the content should include a specific documentation standard for obtaining a history of substance use, addiction or dependence, or co-occurring psychiatric conditions. We believe that such history presents unique complications in treating chronic pain with opioids and should be definitively identified on a priority basis in advance of prescription. The language in Subsection (2) pertaining to "The patient's medical and psychosocial history" could be expanded to specifically include such a standard, or a new subsection should be added to this effect.

Thank you for considering our recommendation. We look forward to working with the Board and our state's physicians to forestall an epidemic of prescription opioid abuse and preventable injuries and deaths in South Dakota. Please feel free to call on me if you have questions or wish to discuss this matter. I may be reached by calling (605) 224-0123; my e-mail address is tladosch@dakota2k.net.

Very truly yours,



Terrance L. Dosch
Executive Director

Encl - 1

Phone & FAX: (605) 224-0123

**SOUTH DAKOTA
COUNCIL OF SUBSTANCE ABUSE DIRECTORS, INC.**

**Terrance L. Dosch, Executive Director
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Effective: 4/15/16

SOUTH DAKOTA STATE MEDICAL ASSOCIATION

Values. Ethics. Advocacy.

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August 30, 2016

SD Board of Medical and Osteopathic Examiners
101 N. Main Avenue, #301
Sioux Falls, SD 57104

RE: SDBMOE Rules Hearing - September 8, 2016

Dear Board Members:

As president of the South Dakota State Medical Association (SDSMA), I am writing on behalf of SDSMA and its approximately 2,500 members concerning certain proposals scheduled for consideration at a public hearing on September 8, 2016.

First, I am writing to express SDSMA's whole-hearted support for proposed new chapter 20:47:07. When used appropriately, opiate analgesics can be important tools for relieving moderate to severe pain arising from a wide range of conditions, disease states, and medical procedures; however, the potential for prescription drug abuse is substantial, and the soaring use of opiate analgesics to treat chronic pain has led to escalating rates of opiate diversion, abuse, addiction, and overdose. According to the CDC, drug overdose is now the leading cause of accidental death in the United States, with 47,055 lethal drug overdoses in 2014.

As a profession that places patient well-being as our highest priority, we must work together with other stakeholder organizations to combat this epidemic. We applaud the proposed rules on medical record documentation as a valuable tool to combat this epidemic, and appreciate the Board's willingness to consider SDSMA's comments and concerns.

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Sioux Falls

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Michelle L. Baack, M.D.
Sioux Falls

Second, I am reaching out to express SDSMA's concerns about the proposed changes to ARSD Chapter 20:52:01.

The changes to ARSD Chapter 20:52:01 completely eliminate the in-person contact requirements for physician assistants. SDSMA believes the existing requirement for periodic in-person contact between the physician and the supervised physician assistant is important so that the supervising physician can judge the demeanor of the physician assistant and view the setting in which they are providing care. In-person contact is also important so that the physician is exposed to the community in which the physician assistant practices, including the patient community and other health care professionals. Absent the ability to judge the physician assistant's demeanor and care setting, and without feedback from the community (whether it be direct feedback or simply judging the reaction of others), it will be much more difficult for the supervising physician to detect problems such as substance abuse, poor work habits and general quality of care issues.

The elimination of the in-person contact requirement also undermines the goal of improving health care statewide through a team-based approach to care-giving. It is certainly more difficult

Page 2

to build and maintain a team by telephone than through periodic in-person supervision and the accompanying relationship building resulting from spending time together.

SDSMA recognizes that in-person contact is time-consuming and costly, especially when the physician assistant practices in a rural area. In order to address those concerns, SDSMA recommends that the in-person contact requirement be limited to once every 120 days. SDSMA's proposal to revise ARSD 20:52:01:03.01 and 20:52:01:03.02 to provide for in-person contact no less often than once every 120 days is included with this letter as Attachment One.

SDSMA also acknowledges that a supervising physician could require in-person contact as a condition of executing a practice agreement. SDSMA recognizes and supports the role of the board as an advocate for and protector of the public health, and believes in this case the establishment of a minimum requirement for in-person contact is appropriate and consistent with the board's role and responsibilities.

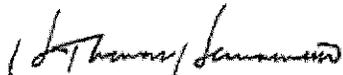
As mentioned in my letter of today to the SDBMOE and the Board of Nursing acting jointly, SDSMA believes that rules for supervision of physician assistants and collaboration with nurse practitioners and nurse midwives should be substantially similar.

SDSMA has no comments on any of the other proposed amendments.

Representatives of SDSMA will be available during the hearing on September 8 to provide oral testimony and to answer questions.

Thank you for your consideration of SDSMA's comments and concerns.

Sincerely,



H. Thomas Hermann, Jr., MD
President

Enclosure

Proposed Changes to ARSD Chapter 20:52:01:03.01 and 20:52:01:03.02

Attachment One

20:52:01:03.01. Supervision of a licensed physician assistant. A licensed physician assistant shall be supervised by a physician licensed pursuant to SDCL chapter 36-4. The supervising physician shall be available for consultation with the physician assistant at all times while the physician assistant is involved in patient care. ~~The supervising physician and physician assistant shall meet in person at least twice each month to discuss patient care and review the physician assistant practice. The meetings shall be held in person unless it is established in the practice agreement and approved by the board that one of the twice monthly meetings may be held by telecommunication.~~ A physician assistant may perform only those duties and responsibilities that are documented in their practice agreement. A physician assistant shall not provide patient care which is beyond or different than the type or specialty of patient care provided by the supervising physician. The supervision plan shall be outlined in the practice agreement and approved by the board. ~~The practice agreement shall also outline provisional supervision plans in the event unforeseen circumstances such as inclement weather or illness prevent the twice monthly meeting supervision requirement.~~

20:52:01:03.02. Supervision of a licensed physician assistant—Separate practice location. Supervision shall occur on a regular and routine basis. The collaborating physician must be physically present on-site every one hundred twenty days at each physician assistant practice location. ~~In addition to the required two meetings per month, the supervising physician must be physically present on-site every ninety days at each physician assistant practice location.~~ This requirement does not apply to locations where health care services are not routine to the setting, including patient homes and school health screening events.



Leaders in Multidisciplinary Care Since 1988

September 2, 2016

South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Ave.
Suite 301
Sioux Falls, SD 57104
SDBMOE@state.sd.us

RE: Proposed Rule 20:47:07:01. Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain.

To the South Dakota Board of Medical and Osteopathic Examiners:

On behalf of the Academy of Integrative Pain Management (AIPM, formerly American Academy of Pain Management), I wish to submit the following comments for consideration, with respect to proposed rule 20:47:07:01 relating to standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain. AIPM recognizes the challenges involved in addressing two major public health crises, namely, inadequate treatment for pain, and prescription drug abuse, and to that end, has been heavily involved in both national and state-level efforts to address both health concerns. We thank you for addressing these dual health concerns, and in an effort to aid you in your endeavors, AIPM offers the following comments in response to this proposed rule.

Introductory paragraph

In order to ensure that prescribers are able to comply with these rules, it vital that the rules are written with the utmost clarity. We interpret the introductory paragraph of this rule to mean that a prescriber *must* or *shall* include each of the listed items in the medical record; however, because the rule doesn't use the terms *must* or *shall*, we are concerned that this mandate may read more like a recommendation to prescribers. For the sake of clarity, we suggest replacing the current introductory sentence (immediately following the title of the rule) with the following language:

When a physician prescribes controlled substances for the treatment of chronic pain, the standard of care for medical records requires that the physician must document each of the following listed items within the patient's medical record:

Paragraph (3)

This provision requires that the prescriber records in the medical record "The results of all physical examinations and all laboratory tests". We agree that the medical record should include this information,

but we are concerned with the use of the word “all” within the rule. Does it mean “all” results of examinations and tests that *this* prescriber has conducted? Does it mean “all” results of examinations and tests that have been conducted in a patient’s lifetime, *by any prescriber*? We are concerned that even the most well-meaning physician could find themselves running afoul of this requirement simply due to the fact that “all” information is such a broad requirement—and one that may be impossible to achieve. We recommend that the Board reevaluate this provision in order to determine appropriate limits. For example, an improved provision may be:

The results of all physical examinations and all laboratory tests conducted by the prescribing physician within the past two (2) years;

Paragraph (4)

This provision requires that the prescribers records in the medical record “Confirmation that the appropriate state prescription drug monitoring program has been accessed, and the date of that access, or an explanation why it was not accessed”. However, South Dakota Codified Laws § 34-20E-11 clearly states that “Nothing in this chapter requires a prescriber or dispenser to obtain information about a patient from the central repository prior to prescribing or dispensing a controlled substance.” We find the disconnect between these two provisions to be extremely problematic, and potentially even disallowed by law. Well-meaning prescribers currently believe that checking the prescription monitoring program (PMP) prior to prescribing is optional—and they are correct. However, according to this proposed provision, prescribers affected by this rule would be required to document that they did, in fact, access the prescription monitoring program. **Because the legislature has proactively decided that checking the PMP is optional, and further, that prescribers have immunity from liability for checking or not checking the PMP, we find this proposed rule to be in direct violation of legislative intent.** It is our understanding that the legislature would have to first change the underlying PMP statute in order for the Board to implement a rule such as this.

Paragraph (7)

This provision pertains to instructions given to the patient in regard to risks and expected benefits of opioid analgesics; however, it is unclear from the provision if the prescriber is required (1) to discuss everything mentioned in this paragraph with the patient; or (2) to document in the medical record what they have *chosen* to discuss with the patient. We suggest clarifying this paragraph so that prescribers understand exactly what is required of them.

If the Board intends for prescribers to discuss everything mentioned in this paragraph related to risks and benefits with the patient, we recommend the following language:

Instructions to the patient, including discussions with the patient and, if appropriate, the patient’s significant other or caregiver, pertaining the risks and benefits of controlled substances used to manage pain. These instructions/discussions shall include information pertaining to: risks of addiction, overdose, and death; proper use and storage of medication; proper disposal of unused medication; and the use of naloxone products to reverse overdose;

If the Board intends for prescribers to document what they have *chosen* to discuss with the patient pertaining to risks and benefits, the word “shall” in the above language should be replaced with “may”.

Paragraph (8)

This provision requires prescribers to document in the medical record “Results of ongoing assessments, including, when appropriate, urine drug tests...” We find the use of the word “appropriate” to be vague. When is a urine drug test appropriate? Who determines this? As we understand the intent of this provision, appropriateness of urine drug testing would be determined by the prescribing physician. We absolutely support the prescribing physician having this discretion, but we believe this needs to be made clear so that those subject to this rule do not misinterpret this rule to mean that the Board has determined that urine drug testing is necessary for all patients. In order to clarify this provision, we suggest replacing the current language with the following:

Results of ongoing assessments of patient progress or lack of progress in terms of pain management and functional improvement. This requirement includes documentation of any urine drug tests or behavioral screening tools determined by the prescribing physician to be necessary to ensure patient safety and adherence;

Paragraph (13)

This provision requires prescribers to document in the medical record the “Name, address, and telephone number of the patient’s pharmacy.” While we can understand the benefit of the prescriber documenting the patient’s *preferred* pharmacy, we must strongly recommend that this provision not be utilized as a pharmacy lock-in measure, as it could potentially be construed to be as it is currently written. Consequently, we strongly recommend that you make it clear that this is not a pharmacy lock-in measure.

These types of provisions, while well meaning, can be challenging to implement and can cause problems for patients. When the pharmacy is initially chosen and documented, the patient may be intending to take the prescription to a particular pharmacy, only to discover that the pharmacy is out of their medication, thus necessitating a trip to a second pharmacy. However, then the documented pharmacy won’t match up with the utilized pharmacy, which could cause a well-meaning patient, merely trying to fill their prescription, to be labeled as non-adherent. There are many legitimate reasons that a patient may need to use different pharmacies at different times.

We suggest deleting this provision entirely. However, if the Board wishes to keep the provision, we suggest changing the language so that it reads:

Name, address, and telephone of the patient’s preferred pharmacy, and confirmation that the patient intends to use the same pharmacy to fill each prescription, but will notify the prescribing physician if that plan is changed.

Title and scope of the rule: Removing the cancer/non-cancer distinction

Our final concern is with the overall scope of this rule. Both the title of the rule and the introductory sentence make it clear that the rule will only apply to “chronic, non-cancer pain.” We strongly suggest that

you remove “non-cancer” from this language, instead making this rule apply to all chronic pain, regardless of the etiology of that pain.

AIPM and its partners, the American Cancer Society and the American Cancer Society Cancer Action Network, have argued in a number of settings, including in testimony submitted to the US Food and Drug Administration, that, in the context of opioid therapy, making a distinction between “cancer pain” and “non-cancer pain” (or any other type of pain) is inappropriate and scientifically unsupported. Additionally, in the context of rules such as this, it is possible to make the case that excluding treatment of pain resulting from cancer actually creates a sort of “reverse discrimination” against people with cancer. Following are several points to clarify our concerns:

- Defining “cancer pain” and “non-cancer pain” is increasingly challenging and arbitrary. The first definitional issue to be addressed is what is typically meant when someone talks about “cancer pain” and “non-cancer pain”. Various sources have used various definitions, but the prevailing opinion is that “cancer pain” should include pain caused either by the cancer itself, or by treatments used to address the cancer (e.g., surgery, radiation therapy, and chemotherapy). Others, however, limit their definition to pain caused only by the cancer itself. *We believe that the effects of cancer treatment are a very important part of the cancer survivorship experience, so we advocate for the inclusion of pain resulting from cancer treatment in the definition of “cancer pain”. Should you choose to maintain the distinction between “cancer pain” and “non-cancer pain” in this rule, we also urge you to provide definitions of those terms.*

In the 1990s, when advocacy for the use of opioids to treat cancer-related pain was peaking, cancer and its treatment were very different than they are now. At that time, most people with cancer did not experience long-term survival, with a majority dying within five years of their diagnosis. Now, however, more than 60% of people diagnosed with cancer will survive five years or longer, creating a greater opportunity for people to experience long-lasting cancer-related pain. One reason for this increased survival is the widespread use of increasingly neurotoxic chemotherapeutic agents, as well as advances in supportive care that enable people with cancer to receive higher doses of these medications for longer periods of time. The end result is a growing number of people who are long-term cancer survivors with chronic pain resulting from their cancer treatment—pain that is most often, although not exclusively, neuropathic in nature. This pain can persist for many years, and in some cancer survivors, may be a life-long condition.

The definitional issue raised here has to do with the length of time for which this cancer treatment-related pain is to be considered “cancer pain”; that is, is there some point in time at which this pain ceases to be “cancer pain” and becomes “non-cancer pain”? Some governmental agency policies carve out exceptions to insurance coverage limitations for treatment of cancer pain, leading to concern that third-party payers (potentially including Medicare and Medicaid) may argue that, after a certain length of time, pain resulting from cancer treatment should be considered “non-cancer pain”, thus relieving those payers from responsibility to cover expensive treatments for these pain diagnoses. If a similar stance were to be adopted by agencies promulgating opioid treatment rules such as these, a cancer survivor might be eligible for opioid treatment one day and ineligible the next day. We don’t believe the turn of a page in the calendar should determine eligibility, but rather, that eligibility should be determined by the cancer survivor’s response to opioid therapy.

Consistent with our preference that pain resulting from cancer treatment be considered “cancer pain”, we also believe that it should continue to be considered “cancer pain” for its entire duration.

- Physiologically and pharmacologically, pain is the same, whether it results from cancer, cancer treatment, or a non-cancer cause. What should be at issue in rule promulgation is the physiology underlying a painful condition and the response to pharmacological treatment of that condition. Whether it is a tumor, the sequelae of cancer treatment, or any of a number of non-cancer-related causes that produces a physiological change that the person labels as “pain” is immaterial. The important point is that the changes in the nervous system that result in pain are the same, regardless of whether the cause is related or unrelated to cancer.

Similarly, the decision about whether or not to use opioids as part of the treatment for a painful condition should be based on the person’s response to those opioids, not on the condition that produced the physiological changes that are labeled as “pain”. We are not aware of any data that suggest that opioid receptors function differently in people with, versus without, cancer. To suggest that certain factors need to be considered when using opioids to treat people without cancer, but not when treating people with cancer, seems illogical and devoid of evidentiary support.

- Creating a cancer/non-cancer distinction implies that “non-cancer pain” is a heterogeneous entity. In fact, “non-cancer” pain is a condition associated with scores, if not hundreds, of diverse diagnoses. For some of these diagnoses, existing data appear to suggest that the use of opioids is not beneficial (e.g., fibromyalgia), while for others, the bulk of the existing data suggest that opioids may be beneficial for many people with those conditions (e.g., severe osteoarthritis, sickle cell disease, etc.). This heterogeneity in opioid responsiveness is the reason why rules such as these need to emphasize that the propriety of opioid therapy can only be assessed in the context of the individual’s response to that therapy, not on the basis of diagnosis alone—and certainly not on the basis of whether the pain results from cancer and its treatment, or from other causes.
- Excluding cancer survivors from provisions of these rules exposes them to reverse discrimination. Rules like this one are typically promulgated in order to ensure appropriate pain care while reducing the morbidity and costs associated with inappropriately treated pain. These potential adverse outcomes are not specifically stated, but it is implied that they include abuse and diversion of opioids, and they likely also include the development of addiction and the occurrence of overdose, whether it is ultimately fatal or not.

In our view, excluding cancer survivors from the provisions of these rules suggests that the drafters believe one or both of the following to be true:

- Cancer survivors do not abuse or divert opioids, nor do they develop addiction or experience overdose as a result of opioid therapy; and/or
- Although these adverse outcomes may occur in cancer survivors, it is not important to attempt to prevent them by including cancer-related pain in the scope of these rules.

We are aware of no data to suggest that cancer survivors are less susceptible to any of these adverse outcomes (although, it is probably also fair to say that such data may not exist in the scientific literature). In fact, a case could easily be made that cancer survivors have a higher

prevalence of addiction to non-opioid substances, given that addiction is a risk factor for the development of many cancers. Hepatitis C and HIV resulting from intravenous drug abuse are associated with increased risk of liver cancers and lymphomas, respectively, and perhaps other types of cancer as well, and many types of cancer are more prevalent in the context of alcohol and nicotine abuse/addiction. The presence of one substance use disorder (including those involving alcohol and nicotine) is regarded as a significant risk factor for a substance use disorder involving opioids, too.

Cancer survivors should expect to benefit equally with other people from rules such as these. *Therefore, we respectfully request that these rules be written to include all types of chronic pain, regardless of whether its etiology is cancer-related or not.*

I hope these comments are helpful and promote discussion of some of the important issues we have highlighted. As stated earlier, AIPM is committed to doing its part to improve care for people with pain, and in so doing, helping mitigate the risks associated with such care. I am happy to discuss any of these concerns and recommendations with you, so please do not hesitate to contact me by phone at 209-288-2214, or by email at kduensing@aapainmanage.org.

About the Academy: The Academy of Integrative Pain Management is the premier organization for all clinicians who care for people with pain. It is the largest pain management organization in the nation and the only one that embraces, as part of its mission statement, an integrative model of care, which: is patient-centered; considers the whole person; encourages healthful lifestyle changes as part of the first line of treatment to restore wellness; is evidence-based; brings together all appropriate therapeutic approaches to reduce pain and achieve optimal health and healing; and, encourages a team approach.

Sincerely yours,



Katie Duensing, J.D.
Assistant Director for Legislative and Regulatory Affairs
State Pain Policy Advocacy Network (SPPAN)
Academy of Integrative Pain Management

SOUTH DAKOTA
COUNCIL OF SUBSTANCE ABUSE DIRECTORS, Inc.
2520 East Franklin Street
Pierre, South Dakota 57501

August 30, 2016

Margaret B. Hansen, PA-C, MPAS, Executive Director
South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Avenue, Ste. 301
Sioux Falls, South Dakota 57104

Dear Ms. Hansen:

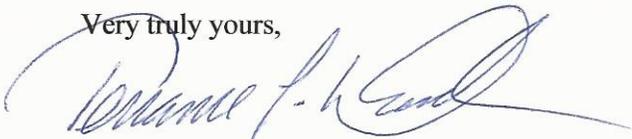
This is provided to present comment regarding the South Dakota Board of Medical and Osteopathic Examiners proposed rules to create standards for medical record documentation when prescribing opioids for chronic pain.

The South Dakota Council of Substance Abuse Directors is a non-profit association representing fifteen organizations that provide comprehensive alcohol/drug treatment and prevention services. I've included a copy of our membership roster for your clarification. Our system has witnessed a significant and growing problem with abuses, addictions, and overdoses related to prescription opioids. While the issue in South Dakota has not reached the proportions and severity experienced in other areas of the country, the ongoing trend is of great concern and tremendous public health importance. Accordingly, we strongly support the Board's efforts to enact standards that best assure the appropriate prescription and use of such medications.

As regards ARSD Section 20:47:07:01, we believe that the content should include a specific documentation standard for obtaining a history of substance use, addiction or dependence, or co-occurring psychiatric conditions. We believe that such history presents unique complications in treating chronic pain with opioids and should be definitively identified on a priority basis in advance of prescription. The language in Subsection (2) pertaining to "The patient's medical and psychosocial history" could be expanded to specifically include such a standard, or a new subsection should be added to this effect.

Thank you for considering our recommendation. We look forward to working with the Board and our state's physicians to forestall an epidemic of prescription opioid abuse and preventable injuries and deaths in South Dakota. Please feel free to call on me if you have questions or wish to discuss this matter. I may be reached by calling (605) 224-0123; my e-mail address is tladosch@dakota2k.net.

Very truly yours,



Terrance L. Dosch
Executive Director

Encl - 1

Phone & FAX: (605) 224-0123

**SOUTH DAKOTA
COUNCIL OF SUBSTANCE ABUSE DIRECTORS, INC.**

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Effective: 4/15/16

Phalen, Jane

From: Deb Fiebelkorn
Sent: Wednesday, September 07, 2016 2:17 AM
To: SDBMOE
Subject: Chronic Pain Sufferers

Doctors,

I realize this is late. Everything I do is late, due to my illnesses. I am disabled by many chronic conditions.

My internal medicine doctor was prescribing my fentanyl patch and oxycodone medications. Then, June 1, of this year, he had to stop due to regulations or the hint of things to come. I imagine his license would be under the microscope of scrutiny if he continued prescribing for my chronic pain.

There are many of us out here, who are suffering now, because our medications for chronic pain were stopped. Many of us had horrible withdrawals and illnesses while detoxification took place. Yes, there is a problem in this country, with addiction and theft of narcotics, etc. But taking chronic pain sufferers medications away from them was just plain wrong and frankly, I believe, against the oath doctors took when they were licensed. The Hippocratic Oath states:

The Hippocratic Oath is one of the oldest binding documents in history. Written in antiquity, its principles are held sacred by doctors to this day: treat the sick to the best of one's ability, preserve patient privacy, teach the secrets of medicine to the next generation, and so on. "The Oath of Hippocrates," holds the American Medical Association's Code of Medical Ethics (1996 edition), "has remained in Western civilization as an expression of ideal conduct for the physician."

<http://www.pbs.org/wgbh/nova/body/hippocratic-oath-today.html>

Deb Fiebelkorn, B.S.
Nurse Paralegal

All information is Confidential and covered by HIPAA and the Privacy Act. If you have received this email by error, please send it to the addressee with a brief message; then destroy.



September 7, 2016

Ms. Margaret Hansen, Executive Director
South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Avenue, Suite 301
Sioux Falls, SD 57104

Dear Ms. Hansen,

On behalf of Horizon Health Care, Inc. a Federally Qualified Health Center, I extend appreciation to the Medical and Osteopathic Examiners for putting forth proposed rules to improve the efficiency and operation of the Board and update physician supervision requirements to improve access to care. As a healthcare provider in rural and frontier areas throughout the state, Horizon is keenly aware of the need to remove barriers to providing health care.

Horizon Health Care, Inc. fully supports the proposed changes to allow physician supervision to occur through electronic means in order to fulfill the requirements of personal contact between the supervising physician and physician assistant. Allowing supervision via electronic means is consistent with the widespread use of electronic communications as part of a growing telemedicine presence in our state. The use of electronic communications between the physician and physician assistant will allow for a continuity of care in our most rural areas in a way that maximizes the time of the practitioners and ensures the quality of care being provided.

The proposed changes have positive real world implications which improve access to care. By way of example, Horizon merged with Prairie Community Health earlier this year. The merged service area serves the northwest corner of the state. Finding a physician who could meet the face to face requirements of supervision in this remote and isolated part of our state was difficult. Horizon eventually contracted with a physician group from North Dakota to meet these requirements at considerable cost of time and resources.

Horizon recently hired an internal medicine physician based out of our James Valley Health Center in Huron. This physician now serves as the supervising physician for the physician assistant in the northwest clinics. To fulfill the current requirement of face to face contact, this physician travels eight hours per month to provide supervision three days per month in these locations. The changes proposed to allow electronic communication would allow for more routine collaboration between the physician and physician assistant and allow the travel time used between facilities to be used to treat additional patients in need of care at the James Valley Health Center.

Horizon fully supports the proposed changes to physician supervision and appreciate the Board's commitment to improving access to care for all South Dakotans.

Sincerely,

John Mengenhausen

John Mengenhausen
Chief Executive Officer

IN THE MATTER OF THE
PROMULGATION OF
ADMINISTRATIVE RULES

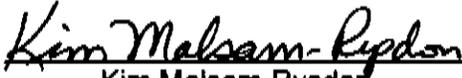
ADMISSION OF SERVICE

Personal service of

(1) the Board of Medical and Osteopathic Examiners proposed rules §§

20:47:07:01, 20:47:07:02, 20:52:01:03.01, 20:52:01:03.02, and 20:82:04 is admitted at Pierre,

South Dakota, this 2nd day of August, 2016.



Kim Malsam-Rysdon
Secretary of Health

IN THE MATTER OF THE
PROMULGATION OF
ADMINISTRATIVE RULES

AUTHORIZATION TO PROCEED

Pursuant to SDCL subdivision 1-26-4(2), I, Kim Malsam-Rysdon,
Secretary of the Department of Health, authorize the Board of Medical and Osteopathic
Examiners to proceed with the promulgation of the proposed rules §§ 20:47:07:01,
20:47:07:02, 20:52:01:03.01, 20:52:01:03.02, 20:78:03, 20:78:04, 20:78:05, and 20:82:04

Dated this 2nd day of August, 2016.



Kim Malsam-Rysdon
Secretary of Health

IN THE MATTER OF THE
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Personal service of _____

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20:47:07:02, 20:52:01:03.01, 20:52:01:03.02, and 20:82:04

(2) the Notice of Hearing

(3) the Fiscal Note, and

(4) the Small Business Impact Statement

is admitted at Pierre, South Dakota, this 2nd day of August, 2016.



Legislative Research Council

For these rules, the Agency contact person is: Tyler Klatt

Phone Number: 367-7781

IN THE MATTER OF THE
PROMULGATION OF
ADMINISTRATIVE RULES

ADMISSION OF SERVICE

Personal service of

- (1) the Board of Medical and Osteopathic Examiners proposed rules §§

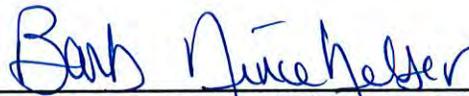
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is admitted at Pierre, South Dakota, this 2nd day of August, 2016.



Bureau of Finance and Management

(NOTE: A copy of this form may be obtained from the Bureau of Finance and Management. If your rules have a negative fiscal impact on a local government, such as a county or a school district, you must direct the Bureau of Finance and Management to send a copy of its fiscal note to the organizations listed in SDCL 1-26-4.2.)

**ADMINISTRATIVE PROCEDURES ACT
FISCAL NOTE
Prepared by Submitting Agency**

	CODE	NAME
DEPARTMENT	09	Health
DIVISION	2	Boards
PROGRAM	05	Board of Med & Osteo

PROPOSED RULE: 20:47:07:01, 20:47:07:02, 20:52:01:03.01, 20:52:01:03.02, 20:82:04,

Hearing Date: September 8, 2016

FISCAL IMPACT STATEMENT:

Pursuant to SDCL 1-26-4.2, these rules have minimal fiscal impact on all entities. No additional staffing or resources are required.

FISCAL NOTE SUMMARY:

The proposed rules provide administrative procedures and clarifications. No governmental subdivisions will be impacted.

COST INCREASES (DECREASES)

State Agencies:	First-Year Impact	Continuous-Yearly Impact
TOTAL	\$0	\$0
Local Subdivisions:		
TOTAL	\$0	\$0
Small Business Increases (Decreases)		
TOTAL	\$0	\$0

REVENUE INCREASES (DECREASES)

Revenue Increases (Decreases) State, Local & Small Business :		
TOTAL	\$0	\$0

APPROVED Margaret B. Hansen DATE 7/26/2016
Signature Department Secretary or Board or Commission Chairman

ATTACH: Copy of proposed rules; separate sections for: 1) explanation of rules effect, i.e. what procedures, schedules, activities, etc. will change with its adoption 2) statistics used, and their source, 3) assumptions that were made to arrive at fiscal impact, 4) computations that were made, and 5) small business impact statement

South Dakota Department of Health
Notice of Public Hearing to Adopt Rules

A public hearing will be held at 101 N. Main Ave, in the First Dakota National Bank building in room 215, Sioux Falls, South Dakota on September 8, 2016 , at 11:00 a.m. CDT, to consider the adoption and amendment of proposed rules numbered: §§ 20:47:07:01, 20:47:07:02, 20:52:01:03.01, 20:52:01:03.02, and 20:82:04. The public hearing will also be accessible via the Dakota Digital Network (DDN) at the following locations: CAP A, 500 E. Capitol, Pierre, SD and the Rapid City Dept. of Transportation (DOT), 2300 Eglin St., Rapid City, SD.

The effect of the rules will be to create standards for medical record documentation when prescribing opioids for chronic pain, to remove restrictions related to the supervision of physician assistants, and to clarify continuing education requirements for genetic counselors

The reason for adopting the proposed rules is to provide standards for what is expected in the medical record documentation for prescribers of opioids for the treatment of chronic, non-cancer pain; remove unnecessary requirements that limit access to care and place unnecessary burden on supervising physicians; implement, based on HB 1069, continuing education requirements for genetic counselors.

Persons interested in presenting data, opinions, and arguments for or against the proposed rules may do so by appearing in person at the hearing or by sending them to the South Dakota Board of Medical and Osteopathic Examiners, 101 N. Main Ave., Suite 301, Sioux Falls, SD 57104 or by email to SDBMOE@state.sd.us. Material sent by mail must reach the Board by September 3, 2016 to be considered.

After the hearing, the Board will consider all written and oral comments it receives on the proposed rules. The Board may modify or amend a proposed rule at that time to include or exclude matters that are described in this notice.

Notice is further given to individuals with disabilities that this hearing is being held in a physically accessible place. Please notify the Board at least 48 hours before the public hearing if you have special needs for which special arrangements must be made. The telephone number for making special arrangements is (605) 367-7781.

Proposed rules text is available on the following websites: www.sdbmoe.gov and rules.sd.gov. Copies of the proposed rules may be obtained without charge from the following address.

South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Ave. Ste.301
Sioux Falls, South Dakota 57104

Published at the approximate cost of \$_____.

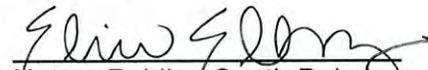
IN THE MATTER OF THE
PROMULGATION OF
ADMINISTRATIVE RULES

AFFIDAVIT OF MAILING NOTICE
TO INTERESTED PARTIES

I, Tyler Klatt, under oath, do swear, that on August 8, 2016, I mailed a copy of the notice attached to this affidavit to the list of persons attached to this affidavit. I further swear that the attached list is a true and correct list of all persons who have requested advance notice of rule-making proceedings by the Department of Health.


Tyler Klatt

Subscribed and sworn to
before me this 8th day
of AUGUST, 2016.


Notary Public South Dakota

(SEAL)

My Commission expires
9/15/17



From: [SDBMOE](#)
Bcc: ["Michael.Farritor@sanfordhealth.org"](#); ["Kim.Patrick@sanfordhealth.org"](#); ["scott.duke@sdaho.org"](#); [Damgaard, Gloria](#); ["pmcinerney@regionalhealth.com"](#); ["bsmith@sdsma.org"](#); [sdsma.org_meast](#); [Shanard-Koenders, Kari](#); ["jen.porter@sdaho.org"](#); ["diedrich@regionalhealth.com"](#); ["TME@magt.com"](#); ["sdpha@sdpha.org"](#); ["Ann.Roemen@independentcare.org"](#); ["jonellis@argusleader.com"](#); ["jcleland@ksfy.com"](#); ["jacob.iverson@ksfy.com"](#); ["a_anderson@kdlt.com"](#); ["jandrews@keloland.com"](#); ["Tryg.Odney@gmail.com"](#); ["quinn.stein@sanfordhealth.org"](#); ["Janice@brandenburgerconsulting.com"](#); ["Julie.Kalahar@lakeareatech.edu"](#); ["yorkdrew@hotmail.com"](#); ["mrs.hagen@yahoo.com"](#); ["dawn.rost@bunl.com"](#); ["president@sdemsa.org"](#); ["cvokeley@aota.org"](#)
Subject: Public Hearing for Proposed Administrative Rules
Date: Monday, August 08, 2016 4:34:18 PM
Attachments: [6. BMOE Notice of Public Hearing.pdf](#)

Please find attached a notice of public hearing for proposed administrative rules.

If you wish to participate in the hearing, please contact the Board staff by September 3, 2016, and provide your comments, materials, and indicate whether you wish to testify in front of the Board at the hearing on Thursday September 8th, 2016 at 11:00 AM.

Copies of the proposed rules may be obtained from the South Dakota Administrative Rules website <https://rules.sd.gov/detail.aspx?id=292> or by contacting the Board of Medical and Osteopathic Examiners.

Sincerely,

Tyler Klatt, MPA
Management Analyst
South Dakota Board of Medical and Osteopathic Examiners
101 N. Main Ave., Suite 301
Sioux Falls, SD 57104
Phone 605-367-7781

FORM 14

SMALL BUSINESS IMPACT STATEMENT FORM

See SDCL 1-26-2.1

(NOTE: This form must be signed by either the head of the agency or the presiding officer of the board or commission empowered to adopt the rules. Check your statutes to see who is authorized to promulgate rules. A small business is defined as any business with 25 or fewer full-time employees. When a set of rules is proposed, a general summary shall be provided; each proposed rule amendment shall also be explained thoroughly. In the case of a large set of proposed rules which all have a single purpose and impact, one explanation is sufficient. The law makes it clear that agencies or commissions shall use readily available information and existing resources to prepare the impact statement.)

1. Our agency has determined that the rule/s we are proposing have the following type of impact on small businesses:
 - Direct impact *(please complete remainder of form)*
 - Indirect impact *(please provide a brief explanation, then sign, date, and submit form. Questions 2 through 8 do not need to be answered)*
 - No impact *(please provide a brief explanation, sign, date, and submit form - Questions 2 through 8 do not need to be answered)*

The proposed rules focus on administrative procedures and do not create or change any requirements related to small businesses.

2. A general narrative and overview of the effect of the rule(s) on small business - written in plain, easy to read language:

3. What is the basis for the enactment of the rules(s)?
 - Required to meet changes in federal law
 - Required to meet changes in state law
 - Required solely due to changes in date (i.e. must be changed annually)

Other: _____

4. Why is the rule(s) needed?

5. What small businesses or types of small businesses would be subject to the rule?

6. Estimate the number of small businesses that would be subject to the rule.
 1-99 100-499 500-999 1,000-4,999 More than 5,000
 Unknown - please explain _____
7. Are small businesses required to file or maintain any reports or records under this rule?
 Yes No
- a. If "yes," how many reports must a small business submit to the state on an annual basis?
- b. If "yes," how much ongoing recordkeeping within the business is necessary?
- c. If "yes," what type of professional skills would be necessary to prepare the reports or records?
- The average owner of a small business should be able to complete the reports and/or records with no assistance
 - It is likely that a bookkeeper for a small business should be able to complete the reports and/or records
 - It is likely that a small business person would need the assistance of a CPA to complete the reports and/or records
 - It is likely that a small business person would need the assistance of an attorney to complete the reports and/or records
 - Other _____
 - Unknown - please explain _____
8. Are there any less intrusive or less costly methods to achieve the purpose of the rule (i.e. fewer reports, less recordkeeping, lower penalties)?
 No - please explain _____
 Yes - please explain _____

7/26/2016 _____ BMOE
Dated Authorized Signature Name of Agency



August 15, 2016

Mr. Tyler Klatt
SD Board of Medical and Osteopathic Examiners
101 N. Main Ave., Ste. 301
Sioux Falls, SD 57104

Dear Mr. Klatt:

The South Dakota Board of Medical and Osteopathic Examiners has proposed the amendment and adoption of ARSD 20:47:07:01, 20:47:07:02, 20:52:01:03.01, 20:52:01:03.02 and 20:82:04. We have reviewed the proposed rules, scheduled for hearing on September 8, 2016, and approve the rules for legality with the following comment:

- Use "shall" as the verb when requiring an action from a person.

This letter is based on a preliminary review of your rules. Attached are your rules edited for form and style pursuant to SDCL 1-26-6.5, the Directions for Submitting the Final Draft of the Rules, and the Interim Rules Review Committee Recommended Rules Presentation Format. If you have any questions, please do not hesitate to call me or the staff member who has reviewed your rules.

Sincerely yours,

A handwritten signature in blue ink that reads "Doug".

Doug Decker
Code Counsel

DD:CVC



Form + Style

ARTICLE 20:47

PHYSICIANS AND SURGEONS

Chapter

- 20:47:01 Definitions, Repealed.
- 20:47:02 Operation of board, Transferred.
- 20:47:03 Licensure.
- 20:47:04 Inspections.
- 20:47:05 Declaratory rulings, Transferred.
- 20:47:06 Fees.
- 20:47:07 Medical record documentation.
- 20:47:08 Ethics.

CHAPTER 20:47:07

MEDICAL RECORD DOCUMENTATION

Section

- 20:47:07:01 Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain.
- 20:47:07:02 Definition of chronic pain.

20:47:07:01. Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain. The standards for medical records when a physician prescribes controlled substances for the treatment of chronic non-cancer pain include each of the following listed items:

- (1) Copies of the signed informed consent and any treatment agreement required by the physician;
- (2) The patient's medical and psychosocial history;
- (3) The results of all physical examinations and all laboratory tests;
- (4) Confirmation that the appropriate state prescription drug monitoring program has been accessed, and the date of that access, or an explanation why it was not accessed; ;
- (5) The results of all risk assessments, including results of any screening instruments used;
- (6) A description of the treatments provided, including all medications prescribed or administered, with the date of prescription or administration, the name and type of the medication, and the dosage and quantity of medication prescribed or administered. The medical records must include all prescription orders for opioid analgesics and other controlled substances, whether written, telephoned, faxed, or electronically transmitted;
- (7) Instructions to the patient, including discussions with the patient and, if appropriate, significant others of the risks and benefits of opioid analgesics, including the risks of addiction, overdose, and death; proper use and storage of medication; proper disposal of unused medications; and the use of naloxone products to reverse overdose;
- (8) Results of ongoing assessments, including, when appropriate, urine drug tests, of patient progress or lack of progress in terms of pain management and functional improvement;
- (9) Notes on any evaluations by and consultations with specialists;

- (10) Any other information used to support the initiation, continuation, revision, or termination of treatment; Any steps taken in response to aberrant medication use by a patient and aberrant behaviors related to a prescription for an opioid analgesic;
- (11) Medical records of past hospitalizations or treatments by other providers, to the extent obtained by the physician;
- (12) Authorization for release of information to other treatment providers; and
- (13) Name, address, and telephone number of the patient's pharmacy.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.

References: Federation of State Medical Boards Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain; Federation of State Medical Boards Model Policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office.

20:47:07:02. Definition of Chronic Pain. For the purposes of section 20:47:07:01, the term, chronic pain, means ongoing, recurrent, or persistent pain lasting beyond the usual course of an acute illness or injury or that is three months or longer in duration.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.

ARTICLE 20:52

PHYSICIAN ASSISTANTS

Chapter

20:52:01 Physician assistant license.

CHAPTER 20:52:01

PHYSICIAN ASSISTANT LICENSE

Section

20:52:01:01	Application for physician assistant license.
20:52:01:02	Repealed.
20:52:01:03	Physician assistant practice agreement.
20:52:01:03.01	Supervision of a licensed physician assistant.
20:52:01:03.02	Supervision of a licensed physician assistant — Separate practice location. Repealed.
20:52:01:04	Repealed.
20:52:01:05	Termination of physician assistant practice agreement.
20:52:01:06 to 20:52:01:08	Repealed.
20:52:01:09	Renewal of physician assistant license.
20:52:01:10	Repealed.
20:52:01:11	Fee amounts.

20:52:01:03.01. Supervision of a licensed physician assistant. A licensed physician assistant shall be supervised by a physician licensed pursuant to SDCL chapter 36-4. The supervising physician shall be available for consultation with the physician assistant at all times while the physician assistant is involved in patient care. The supervising physician and physician

ARTICLE 20:82

GENETIC COUNSELORS

Chapter

- 20:82:01 Definitions.
- 20:82:02 Licensure requirements.
- 20:82:03 Ethics.
- 20:82:04 Continuing education

CHAPTER 20:82:04

CONTINUING EDUCATION

Section

- 20:82:04:01 Continuing education requirements.
- 20:82:04:02 Reporting continuing education *Continuing education confirmation.*

20:82:04:01. Continuing education requirements. To qualify for renewal of a license upon its expiration as prescribed in SDCL 36-36-11, an applicant for renewal ~~must complete 25~~ *shall* ~~25~~ *twenty-five* continuing education hours annually or maintain current certification by the ABGC or ABMGG.

Source

General Authority: 36-36-12

Law Implemented: 36-36-11

Continuing education confirmation.
20:82:04:02. ~~Reporting continuing education.~~ Each genetic counselor must sign a statement to confirm compliance with the continuing education requirements of 20:82:04:01. The signed statement must be filed with the ^b Board at the time the genetic counselor makes application for renewal of ^a ~~their~~ genetic counseling license. Upon request by the board, the genetic counselor ~~must~~ ^{shall} submit proof of completion of any continuing education units or proof of current certification by the ABGC or ABMGG.

Source:

General Authority: SDCL 36-36-12

Law Implemented: SDCL 36-36-11

100

Continuing education requirements

Continuing education requirements for the license shall be as follows:

1. The licensee shall complete a minimum of 12 hours of continuing education each year.

2. The licensee shall complete a minimum of 2 hours of continuing education in the field of the license each year.

3. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

4. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

5. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

100

100

100

SOUTH DAKOTA

BOARD OF MEDICAL
AND OSTEOPATHIC
EXAMINERS

SDBMOE

101 N MAIN AVE, SUITE 301

SIOUX FALLS, SD 57104

SDBMOE@STATE.SD.US

P 605-367-7781 F 605-367-7786

HTTP://WWW.SDBMOE.GOV



South Dakota Board of Medical and Osteopathic Examiners
101 N Main Ave, Suite 301
Sioux Falls, South Dakota 57104

August 9, 2016

Sent electronic mail only

Aberdeen News

americannews@aberdeennews.com

Attention: Nancy

Aberdeen, South Dakota

To whom it may concern:

Please publish the enclosed notices in your paper for one issue before August 14, 2016.

Please include your Affidavit of Publication with your invoice.

Sincerely,

Tyler Klatt

Tyler Klatt
Board Staff

Enclosure

SOUTH DAKOTA

BOARD OF MEDICAL
AND OSTEOPATHIC
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SDBMOE

101 N MAIN AVE, SUITE 301

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South Dakota Board of Medical and Osteopathic Examiners
101 N Main Ave, Suite 301
Sioux Falls, South Dakota 57104

August 9, 2016

Sent electronic mail only

Argus Leader

allegals@argusleader.com

Attention: Sara

Sioux Falls, South Dakota

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South Dakota Board of Medical and Osteopathic Examiners
101 N Main Ave, Suite 301
Sioux Falls, South Dakota 57104

August 9, 2016

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Rapid City Journal
legals@rapidcityjournal.com
Rapid City, South Dakota

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Doug Decker
Code Counsel

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Form + Style

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CHAPTER 20:82:04

CONTINUING EDUCATION

Section

- 20:82:04:01 Continuing education requirements.
- 20:82:04:02 Reporting continuing education *Continuing education confirmation.*

20:82:04:01. Continuing education requirements. To qualify for renewal of a license upon its expiration as prescribed in SDCL 36-36-11, an applicant for renewal ~~must complete 25~~ *shall* ~~25~~ *+twenty-five* continuing education hours annually or maintain current certification by the ABGC or ABMGG.

Source

General Authority: 36-36-12

Law Implemented: 36-36-11

Continuing education confirmation.
20:82:04:02. ~~Reporting continuing education.~~ Each genetic counselor must sign a statement to confirm compliance with the continuing education requirements of 20:82:04:01. The signed statement must be filed with the ^b Board at the time the genetic counselor makes application for renewal of ^a ~~their~~ genetic counseling license. Upon request by the board, the genetic counselor ~~must~~ ^{shall} submit proof of completion of any continuing education units or proof of current certification by the ABGC or ABMGG.

Source:

General Authority: SDCL 36-36-12

Law Implemented: SDCL 36-36-11

100

Continuing education requirements

Continuing education requirements for the license shall be as follows:

1. The licensee shall complete a minimum of 12 hours of continuing education each year.

2. The licensee shall complete a minimum of 2 hours of continuing education in the field of the license each year.

3. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

4. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

5. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

100

100

100

License Application - Advanced Life Support - Student Status

License application# 18388 Submitted on: 1-12-2016

Name Information

ANTHONY MICHAEL LUND

Alternates *None reported.*

Address

****Default****

Type Home Address
Public? N
Name/Attention ANTHONY LUND
Address 821 S. Foster Ave.
 Sioux Falls, SD 57103

Identification

Date of Birth 11-14-1975
Birth Place Genoa, Nebraska UNITED STATES
Gender:M **SSN:** XXX-XX-325 **NPI:**
US Citizen Y

Race/Ethnicity/Languages (ALL OPTIONAL)

What is your race? (check all that may apply):

White: Y
 Black or African American: N
 American Indian or Alaska Native: N
 Asian: N
 Native Hawaiian/Other Pacific Islander: N
 Other:

Ethnicity: Are you Hispanic, Latino/a, or of Spanish origin? (check all that may apply)

No: Y
 Mexican, Mexican American, Chicano/a: N
 Puerto Rican: N
 Cuban: N
 Another Hispanic, Latino/a, or of Spanish origin:

Do you speak a language other than English at home?

N

What is this language? (if you answered Yes to above)

N

Education

Name Avera McKennan School of EMS
Location Sioux Falls, SD
Degree EMT Basic
Status In Progress
Dates Attended 01/2016 to 01/2016
Graduated 01/2016

ALS Course Information

Course Name EMT-Paramedic
Provider Avera McKennan School of EMS

Location	Avera McKennan School of EMS Sioux Falls, 57103				
Exam History	Have you taken and passed the examination? N Score: If not, when will you take the exam: In state:				
State or Professional Licensure	No information reported.				
Chronology of Activities	<table> <tr> <td>From: 12/2005</td> <td>Activity:Work</td> </tr> <tr> <td>To:</td> <td>Hancock Concrete 1601 E 39th ST N Sioux Falls, SD 57104</td> </tr> </table> <p style="text-align: right;">Field Tech / Manholes Manhole Percent Clinical: 0% Administrative: 0%</p>	From: 12/2005	Activity: Work	To:	Hancock Concrete 1601 E 39th ST N Sioux Falls, SD 57104
From: 12/2005	Activity: Work				
To:	Hancock Concrete 1601 E 39th ST N Sioux Falls, SD 57104				
Malpractice Liability Claims Information	No information reported.				

Required Disclosures

Definitions:

All questions use the following definitions whether actions were formally, informally, voluntarily or involuntarily committed: Questions refer to both you and your licensure.

A. **Adverse Action** shall refer to having been terminated, stipulated, restricted, limited, conditioned, counseled, reprimanded, suspended, revoked, refused, denied, not renewed, withdrawn or relinquished.

B. **Claim(s)** shall refer to any malpractice, administrative, civil, or criminal final judgments including any pending claims, lawsuits, judgments, and/or settlements.

C. **Complaint** shall refer to any communications which express concerns, warnings or dissatisfaction about personal or profession conduct and rising to the level that the meetings or comments are documented in a written or digital format.

D. **Entity** shall refer to any licensing or disciplinary board, professional agency or committee, academic program, clinic, hospital, or other health-related entity, or governmental agency or organization.

E. **Health related program** shall refer to private or public insurance, Medicare and Medicaid.

F. **Illegal use of drugs** shall refer to drugs whose possession or distribution is unlawful under the Controlled Substances Act, 21 U.S.C. sec. 812.22. The term does include the unlawful use of prescription controlled substances. It does not include the use of a drug taken under supervision by a licensed health care professional, or other uses authorized by the Controlled Substances Act or other provision of Federal law.

G. **Investigation** shall refer to any formal or informal inquiry to acquire and examine facts.

H. **Licensure** shall refer to type of licensure and using any licensure nomenclature such as any registration, permit, certificate, and license. Examples include the subject of this application, DEA registration, etc.

I. **Minor traffic offense** shall refer to any violation which is punishable by a maximum of 30 days in jail, a \$500 fine or both and does not result in a change of driving privileges.

J. **Proceeding** shall refer to whether you have appeared or been requested to appear in private or in public, for a meeting, counseling, hearing, administrative, civil or criminal actions, or been questioned, reviewed, charged, arrested, plead guilty, plead no contest, convicted, received a suspended imposition of sentence or suspended sentence by any entity.

K. **Sexual impropriety** shall refer to misconduct including but not limited to discrimination, complaint, assault, the possession of child pornography, sexual contact with patients or other acts, expressions or gestures that disrespect privacy and are demeaning.

L. **You** shall refer to you or any licensure held by you.

*01 Is this a true statement for your licensure? "My licensure has not experienced adverse **N**

action.”

Explanation:I have never had a license.

*02 Is this a true statement for you? “I have not experienced adverse action.” N

Explanation:I am not sure what I should write here.

03 Has your licensure been subject to any complaint, investigation or proceeding involving any entity? N

04 Have you been subject to any complaint, investigation or proceeding involving any entity? N

05 Have you been dishonorably discharged from a branch of the United States military or National Guard? N

06 Have you had any adverse action during any education, residency or training program N

07 Have you had adverse action with your membership or privileges with any entity regarding your ability to participate in any health related program? N

*08 Have you been subject to a criminal or civil complaint, investigation or proceeding other than minor traffic offenses? Y

Explanation:Yes. Misdemeanor DWIs in 98, 99, 2000. 3rd Offense (felony) in early 2006.

09 Have you had a complaint, investigation or proceeding in any manner concerning sexual impropriety? N

10 Is this a true statement for you? “I have not been reported to NPDB (National Practitioners Data Bank) or HIPDB (Healthcare Integrity and Protection Data Bank).” Y

*11 Is this a true statement for you? “I have experienced no adverse action in privileges at any hospital, clinic or health related entity.” N

Explanation:I have not been a part of this.

12 Have you had any claims paid by you or paid on your behalf for any reason? N

13 Have you had any liability insurance company, including malpractice carriers, change, deny or cancel your coverage? N

14 Have you stopped working or practicing for any period of time greater than or equal to 30 consecutive calendar days? N

15 Do you have a physical, mental or emotional condition which may adversely affect your practice? N

16 Have you been treated for or do you have a diagnosis for any Mental Health condition. (If yes, please ask your treating provider to send a status letter to the Board office). N

17 Does your use of alcohol or drugs affect your ability to provide appropriate care to patients? N

18 Are you currently using illegal drugs or prescription controlled medications in an illegal manner? N

Agreements

I am aware of the Health Insurance Portability and Accountability Act of 1996 (thereinafter called HIPAA) and understand the provisions dealing with the privacy of my medical records. With such knowledge an understanding, I

agree to the following:

- a. I do hereby authorize the use or disclosure of my health information by the South Dakota Board of Medical & Osteopathic Examiners (SDBMOE), for purposes of licensure in the state of South Dakota.
- b. I understand that the information in my health record may include information relating to sexually transmitted diseases, acquired immunodeficiency syndrome (AIDS), or human immunodeficiency virus (HIV). It may also include information about behavioral or mental health services and hospitals, and treatment for alcohol and drug abuse.

I further release, discharge and exonerate all third parties or person(s) from any and all claims, damages, and liabilities of any nature, who in good faith and without malice, release the HIPAA information to the SDBMOE.

AUTHORIZATION AND RELEASE:

Any references to the terms "Users" or "Users of this Application" in this authorization shall include the following entities:

- The South Dakota State Board of Medical and Osteopathic Examiners together with its board members, staff members, legal counsels, investigators, agents, employees, contractees, and authorized representatives hereinafter collectively referred to as SDBMOE;
- Any other state or national medical licensing, medical reporting or medical regulatory board;
- The Federation of State Medical Boards;
- Any other South Dakota or United States agency in furtherance of and in compliance with SDBMOE's duties and responsibilities under my South Dakota Medical Practices Act and its administrative regulations.

I am the person described herein. I have not engaged in any acts prohibited by the criminal or medical statutes of the State of South Dakota. I am the person named on any diploma or certificated that I have received, I am the lawful holder of said diploma or certificate, and the diploma or certificate was given to me in the regular course of instruction and examination without fraud or misrepresentation.

The following deals with SDBMOE consulting with and receiving information from third parties:

I authorize SDBMOE to consult with any third person or party who may have information or evidence concerning my professional, ethical, mental and physical qualifications, or any other matter that SDBMOE deems relevant regarding my continuing qualifications for licensure with SDBMOE. These third persons and parties include hospitals, institutions or organizations, my references, physicians, therapists, previous and present employers, past and present business and professional associates, and local, state, federal or foreign governmental agencies and instrumentalities, courts of any jurisdiction, associations, institutions or law enforcement agencies, together with their representatives thereof, who have custody or control of any documents, records, information or evidence that SDBMOE deems relevant to my Application. **I specifically authorize any state, federal or international law enforcement agency to conduct a background investigation and to report the findings thereof to the SDBMOE.**

I authorize such third persons and parties to unconditionally release to SDBMOE any such information, including documents, records regarding charges or complaints filed against me, formal, or informal, pending or closed, or any other pertinent data or evidence whether favorable or unfavorable that SDBMOE deems relevant to licensure, and to permit the SDBMOE to inspect, receive, and make copies of such documents, records, evidence, and other information for SDBMOE's evaluation of my professional, ethical, mental and physical qualifications that SDBMOE deems relevant to licensure.

I release, discharge and exonerate from any and all claims, damages and liabilities whatsoever such third persons and parties, together with their authorized representatives, who in good faith and without malice, consult with and release to SDBMOE such information, evidence, files or records requested by SDBMOE that SDBMOE deems relevant to licensure.

I declare and affirm under the penalties of perjury that:

This application for licensure, which includes all the information I have provided and the questions I have answered in the South Dakota Common License Application Form and Addenda thereto, have been examined by me, and to the best of my knowledge and belief, are in all things true and correct. I state unconditionally and without reservation that I absolutely understand each and every question contained in this application for licensure, that I and I have answered all of them completely and truthfully. If any user discovers any derogatory information regarding my personal background that was not disclosed when completing this application, the users may immediately cease all processing of this application, and I agree that such nondisclosure shall disqualify me for licensure in South Dakota.

I understand and agree that my submission of this application and actions subsequent thereto, but prior to licensure, shall bear directly upon my qualifications for licensure, and I fully understand that the SDBMOE may

consider all such actions in its determination whether to grant licensure. To that end, I agree that any unprofessional or harassing behavior on my part, or on the part of any agent of mine, with the SDBMOE's members or staff shall establish grounds for the immediate cessation of all processing of this application and disqualify me for licensure in South Dakota. A determination regarding derogatory information or of unprofessional or harassing behavior shall be the sole determination of the SDBMOE, and I will not assert that any other entity, judicial, or otherwise, may make such determination. I understand and agree that cessation of processing of this application by the users as a result of the acts of omissions by myself as described in this paragraph shall not require the SDBMOE, to offer me a hearing or any other due process right, or any other statutory or constitutional rights, and that I will not assert that I am entitled to a hearing.

Signed: Anthony Lund 14 Nov 1975

</htm



South Dakota Unified Judicial System



Record Search Report

Name: LUND, ANTHONY MICHAEL	DOB: 11/14/1975	Gender: M	Party ID: 5571557	UJS ID: 3305723
Address: 5401 W 26 ST #31 SIOUX FALLS, SD 57106-3622				
Aliases: LUND, ANTHONY MICHAEL; LUND, ANTHONY M; LUND, ANTHONY				

 Docket Number: 49SMC10009994 filed in Minnehaha on 12/27/2010 Case Status: Terminated
 Plaintiff: CREDIT COLLECTION SERVICES INC
 Plaintiff: FIRST DAKOTA NATIONAL BANK
 Filing Name: LUND, ANTHONY M

Proceeding Description	Judge	Begin Date	Begin Time	Status Description
Default Hearing		02/16/2011	8:00 AM	Held

Judgment	Judgment Status	Debtor(s)	Debtor Status	Creditor(s)
01	Inactive	LUND, ANTHONY MICHAEL	Satisfied	
01	Inactive			FIRST DAKOTA NATIONAL BANK
01	Inactive			

Judgment Activity	Judgment Date	Amount	Filing Date/Time	Docketing Date/Time
S	2/16/2011	\$451.16	02/16/2011 08:30 AM	02/23/2011 08:02 AM
Original Cost	2/16/2011	\$29.98	02/16/2011 08:30 AM	02/23/2011 08:02 AM

 Docket Number: 49CIV10004413 filed in Minnehaha on 12/06/2010 Case Status: Terminated
 Plaintiff: UNITED ACCOUNTS INC
 Filing Name: LUND, ANTHONY

Proceeding Description	Judge	Begin Date	Begin Time	Status Description
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Judgment	Judgment Status	Debtor(s)	Debtor Status	Creditor(s)
01	Inactive	LUND, ANTHONY MICHAEL	Satisfied	
01	Inactive			UNITED ACCOUNTS INC

Judgment Activity	Judgment Date	Amount	Filing Date/Time	Docketing Date/Time
Original Judgment	12/30/2010	\$1,120.00	12/30/2010 11:30 AM	01/05/2011 12:58 PM
Original Cost	12/30/2010	\$260.68	12/30/2010 11:30 AM	01/05/2011 12:58 PM

 Docket Number: 49SMC09003499 filed in Minnehaha on 04/30/2009 Case Status: Terminated
 Plaintiff: SOUTH DAKOTA DEPT OF LABOR
 Filing Name: LUND, ANTHONY M

Proceeding Description	Judge	Begin Date	Begin Time	Status Description
Default Hearing		06/17/2009	8:00 AM	Held

Judgment	Judgment Status	Debtor(s)	Debtor Status	Creditor(s)
01	Inactive	LUND, ANTHONY MICHAEL	Satisfied	
01	Inactive			SD DEPT OF LABOR AND REGULATION

Judgment Activity	Judgment Date	Amount	Filing Date/Time	Docketing Date/Time
S	6/17/2009	\$1,664.00	06/17/2009 08:30 AM	06/23/2009 04:02 PM
Original Cost	6/17/2009	\$5.98	06/17/2009 08:30 AM	06/23/2009 04:02 PM
Original Interest	6/17/2009	\$522.12	06/17/2009 08:30 AM	06/23/2009 04:02 PM

Docket Number: 49CIV08000960 filed in Minnehaha on 02/29/2008 Case Status: Terminated

Plaintiff: CREDIT COLLECTIONS BUREAU

Plaintiff: ABA RECOVERY SERVICES INC.

Filing Name: LUND, ANTHONY

Proceeding Description	Judge	Begin Date	Begin Time	Status Description
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Judgment	Judgment Status	Debtor(s)	Debtor Status	Creditor(s)
01	Inactive	LUND, ANTHONY MICHAEL	Satisfied	
01	Inactive			CREDIT COLLECTIONS BUREAU
01	Inactive			ABA RECOVERY SERVICES INC.

Judgment Activity	Judgment Date	Amount	Filing Date/Time	Docketing Date/Time
Original Judgment	12/17/2000	\$5,976.98	02/29/2008 10:00 AM	03/03/2008 04:10 PM
Original Cost	12/17/2000	\$59.67	02/29/2008 10:00 AM	03/03/2008 04:10 PM

Docket Number: 49C06000021A0 filed in Minnehaha County on 01/03/2006 Case Status: Terminated

Filing Name: LUND, ANTHONY MICHAEL Arrest Date: 01/02/2006 Arrest Time: 1:44 AM PCN: 200600242

Plaintiff: STATE OF SOUTH DAKOTA Prosecutor: DUSTIN W DEBOER

Counsel Name: MAGEE, DARREN Counsel Type: Public Defender

Count of 32-23-4 (F6) DRIVING UNDER INFLUENCE-3RD OF

On 01/12/2006 the defendant pled No Plea Entered **Disposed on 01/12/2006 Disposition: Recharged**
 Costs: \$118.00

Count of 99-1-39 (M2) zI DEVIATING

On 01/12/2006 the defendant pled No Plea Entered **Disposed on 01/12/2006 Disposition: Dismissed-Motion by Prosecutor**

Count of 32-12-65 (M1) DRIVING WITH REVOKED (NOT SUSPENDED) LICENSE

On 01/12/2006 the defendant pled No Plea Entered **Disposed on 01/12/2006 Disposition: Dismissed-Motion by Prosecutor**

Count of 32-23-4 (F6) DRIVING UNDER INFLUENCE-3RD OF

On 03/29/2006 the defendant pled Guilty **Disposed on 03/29/2006 Disposition: Judgment on Plea of Guilty**

Sentenced on 03/29/2006

Incarcerated to Jail for 365 Day(s) Concurrent with 185 Day(s) suspended and credit for 0 Day(s) served.

License: Revoked DL for 1 Year(s) . Court Possession: 03/29/2006 Work Permit: N

Conditions	
03/29/2006	1 Court Appointed Atty Fees Ordered as Condition of Sentence

Attorney Fee: \$225.00 Fine Due Date: 04/14/2006

*** Bond(s) Ordered ***	
Personal Recognizance Bond Posted on 03/29/2006	Status: \$0.00 Inactive 03/29/2006 - Posted by Defendant

Conditions	
1	REPORT TO JAIL ON TIME[COND-TIME-UNIT] = N
2	NO ALCOHOL RELATED TRAFFIC OFFENSES FOR FIVE YEARS[COND-TIME-UNIT] = N
3	PAY COSTS, BLOOD TEST COSTS, AND \$225.00 ATTY FEES DUE Condition Expiration Date: 20060407

Proceeding Description	Judge Name	Begin Date	Begin Time	Status Description
Initial Appearance		01/03/2006	1:30PM	Held
Initial Appearance		01/26/2006	10:30AM	Held
Arraignment		01/26/2006	10:30AM	Held
Preliminary Hearing		02/16/2006	1:30PM	Cancelled
Change of Plea Hearing		03/29/2006	9:00AM	Held
Pretrial Conference		03/29/2006	9:00AM	Continuance-Requested by Defendant
Jury Trial		04/17/2006	9:00AM	Continuance-Requested by Defendant

Docket Number: 49REC03000250 filed in Minnehaha on 07/10/2003 Case Status: Terminated

Plaintiff/obligee: SD EX REL

Plaintiff/obligee: STORJOHANN, JENNIFER

Defendant/obligor: LUND, ANTHONY M

Proceeding Description	Judge	Begin Date	Begin Time	Status Description
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=====
Judgement      Status      Debtor(s)      Creditor(s)
=====
                SD EX REL
                STORJOHANN,
                JENNIFER
                LUND, ANTHONY M
    
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Judgement Activity	Judgment Date	Amount	Filing Date	Time	Docketing Date/Time
=====	=====	=====	=====	=====	=====

The search you requested is a court records search based on information you provided. The search results may include criminal court data from January 1989 to present, civil court data from January 2006 to present, active money judgments for the past twenty years, and/or inactive money judgments since April 2004, DEPENDING ON THE TYPE OF SEARCH REQUESTED. Records returned are only those that precisely match this information. There may be instances where fine and cost information will appear immediately below a dismissed charge. The amounts indicated are accurate for a different charge but there should be no fine and cost information related to a dismissed charge. Based on the age of a case, not all financial information may be available in the case management system. You should contact the Clerk of Court office where an original action took place to correct any misinformation and collect any missing information.

From: [SDBMOE](#)
To: ["alund75@gmail.com"](mailto:alund75@gmail.com)
Subject: Student Status Application
Date: Wednesday, January 13, 2016 12:47:39 PM
Attachments: [Lund Letter.pdf](#)

Anthony,

Please see the attached letter that is also being mailed to you today.

Thank you,

Randi Sterling

Licensing Specialist

SD Board of Medical & Osteopathic Examiners

101 N. Main Ave., Suite 301

Sioux Falls, SD 57104

www.sdbmoe.gov

BOARD OF MEDICAL
AND OSTEOPATHIC
EXAMINERS

SDBMOE
101 N MAIN AVE, SUITE 301
SIOUX FALLS, SD 57104
SDBMOE@STATE.SD.US
P 605-367-7781 F 605-367-7786
HTTP://WWW.SDBMOE.GOV



Sent Via Electronic Mail and Regular Mail

January 13, 2016

Anthony Michael Lund
921 S. Foster Ave.
Sioux Falls, SD 57103

Dear Mr. Lund:

The South Dakota Board of Medical and Osteopathic Examiners (Board) received your application for student status. After reviewing your application, it has been found that you are ineligible for student status for two reasons:

1. You have not yet interviewed with the program; therefore, are not tentatively accepted
2. You have a felony conviction and would be ineligible for any eventual licensure.

36-4B-6: Grant of student status--Qualifications of applicants. The board may grant authorization for student status in advanced life support upon verification that the applicant meets the following criteria: is at least eighteen years of age; has successfully completed emergency medical technician-basic training; has completed an approved high school course of study or has passed a standard equivalency test; *is of good moral character, and has been tentatively accepted in an approved advanced life support training program.* (Emphasis Supplied)

This notice of ineligibility is not considered to be a denial which would be reportable to national databases such as the National Practitioner Database (NPDB) or any other entity of which I am aware.

This matter may be appealed no later than ten days from the date of this notice.¹

Sincerely,

Randi Sterling

Randi Sterling
Licensing Specialist

¹ 20:78:03:05. Summary action on application. The executive secretary may summarily deny an application based upon primary source documentation that demonstrates that the applicant has not met the education, examination, training, or certification requirements of applicable statutes and regulations. The executive secretary shall notify the applicant in writing of any summary action taken by the executive secretary. The executive secretary's summary action may be appealed to the board by written notice filed with the executive secretary within ten days after notice of the action taken by the executive secretary. If no timely appeal is filed, the executive secretary's action shall be deemed final board action.

SOUTH DAKOTA

BOARD OF MEDICAL
AND OSTEOPATHIC
EXAMINERS

SDBMOE

101 N MAIN AVE, SUITE 301
SIOUX FALLS, SD 57104
SDBMOE@STATE.SD.US
P 605-367-7781 F 605-367-7786
HTTP://WWW.SDBMOE.GOV



DOCUMENT Receipt or Delivery ACKNOWLEDGEMENT

Verified by Government Issued ID

1/21/14
Date

Appeal Letter
Document Title

Anthony Lund
Person Named in Document

Anthony Lund
Print Name
Person Receiving or Delivering Document - Verified by Government Issued ID

[Signature]
Signature
Person Receiving or Delivering Document - Verified by Government Issued ID

[Signature]
Staff Member Signature



Jan 21, 2016

Hi,
My name is Anthony Lund and I would like to appeal the decision to deny me student status to get into the Avera McKennan Paramedic school.

I am currently in the EMT-Basic class and will be interviewing for the Paramedic class next Tuesday (Jan 26).

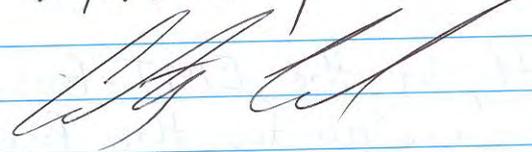
My felony is a 3rd offense DWI which I recieved in early 2006. I served 6 months in county work release and haven't touched alcohol since. I am currently working with the NREMT on this issue too. They requested court documents on everything that happened, and I am awaiting their decision too. I have also been in contact with Lance at the SD Department of Health, EMS Division (605-773-4031 ext 4526) and he had told me that the state will go with what the NREMT says.

I knew my felony was probably going to be an issue, so I started out by contacting the SDDoH and NREMT last November (I still have those emails). They all gave me a glimmer of hope and I thought I would be good to go, until I heard about the SDBMOE. As soon as I found out about the SDBMOE, I got into contact with them to expedite the process.

My hopes are that I did not waste my time away from work and money for the class. I only have one week left and am then hoping to start

the paramedic program in February.

Thank you for your time!

Anthony Lund


605-521-6012
alund75@gmail.com
821 S. Foster Ave, SF SD 57103

From: [anthony lund](#)
To: [SDBMOE](#)
Subject: Attn: Randi Sterling Anthony Lund court documents
Date: Friday, January 22, 2016 12:09:08 PM
Attachments: [CTD 1.pdf](#)
[CTD 2.pdf](#)
[CTD 3.pdf](#)
[CTD 4.pdf](#)
[CTD 5.pdf](#)
[CTD 6.pdf](#)
[CTD 7.pdf](#)
[CTD 8.pdf](#)
[CTD 9.pdf](#)
[CTD 10.pdf](#)
[CTD 11.pdf](#)

This is what the Clerk of Courts gave me.

STATE OF SOUTH DAKOTA)
 :SS
COUNTY OF MINNEHAHA)

IN CIRCUIT COURT

SECOND JUDICIAL CIRCUIT

STATE OF SOUTH DAKOTA,	+	SFPD 2006-00242
Plaintiff,	+	CR. 49C06000021 AO
vs.	+	JUDGMENT & SENTENCE
ANTHONY MICHAEL LUND,	+	
Defendant.		

An Indictment was returned by the Minnehaha County Grand Jury on January 12, 2006, charging the defendant with the crimes of Ct.1 DWI on January 2, 2006, Count 2 DWI Having .08% or More Alcohol by Weight in the Blood on January 2, 2006 and a Part II DWI 3rd Offense Information was filed. The defendant was arraigned upon the Indictment and Information on January 26, 2006 Darren Magee appeared as counsel for Defendant; and, at the arraignment the defendant entered his plea of not guilty of the charges. Defendant with counsel Darren Magee returned to Court on March 29, 2006, the State appeared by Hope Matchan, Deputy State's Attorney. The defendant thereafter changed his plea to guilty to Ct.2 DWI Having .08% or More Alcohol by Weight in the Blood and guilty to the Part II DWI 3rd Offense Information.

Thereupon on March 29, 2006, the defendant was asked by the Court whether he had any legal cause why Judgment should not be pronounced against him. There being no cause, the Court pronounced the following Judgment and

S E N T E N C E

AS TO DWI 3RD OFFENSE HAVING 0.08% OR MORE ALCOHOL BY WEIGHT IN THE BLOOD: ANTHONY MICHAEL LUND shall be imprisoned in the Minnehaha County Jail, located in Sioux Falls, County of Minnehaha, State of South Dakota, for three hundred sixty-five (365) days with one hundred eighty-five (185) days suspended on the following conditions:

1. That the defendant have no alcohol related traffic offenses for five (5) years.
2. That the defendant report to jail on time on April 7, 2006, at 7:00 o'clock P.M. with work release authorized.
3. That the defendant pay \$30.00 liquidated costs, \$30.50 surcharge and \$2.50 victim compensation due April 7, 2006.
4. That the defendant repay Minnehaha County for attorney fees in the amount of \$225.00 through the Clerk of Courts due April 7, 2006.
5. That the defendant pay \$55.00 blood test costs to Minnehaha County through the Clerk of Courts due April 7, 2006.

It is ordered that the defendant's driving privileges are revoked for one (1) year upon release from jail.

It is Ordered that the defendant shall provide a DNA sample upon intake into the South Dakota State Penitentiary or the Minnehaha County Jail, pursuant to SDCL 23-5A-5.

It is Ordered that Count 1 charging ANTHONY MICHAEL LUND with DWI be and hereby is dismissed.

This defendant is eligible for the Minnehaha County Jail "sentenced to serve" program. yes no

6 Dated at Sioux Falls, Minnehaha County, South Dakota, this day of May, 2006.

BY THE COURT:

Joseph Neiles
Judge Joseph Neiles
Circuit Court Judge

ATTEST:
CHARLES M. FECHNER, Clerk
By: Ami Wickman
Deputy

FILED
MAY 08 2006
Minnehaha County, S.D.
Clerk Circuit Court

STATE OF SOUTH DAKOTA)
) :SS
COUNTY OF MINNEHAHA)

IN CIRCUIT COURT
SECOND JUDICIAL CIRCUIT

STATE OF SOUTH DAKOTA
Plaintiff,

06-21

INFORMATION

vs.

PART II THIRD OFFENSE
DRIVING WHILE UNDER THE
INFLUENCE

ANTHONY MICHAEL LUND,
Defendant.

THE UNDERSIGNED, (Deputy) State's Attorney of the County of
Minnehaha, in the name of, and by authority of the State of

South Dakota, informs the Court: That ANTHONY MICHAEL LUND on
or about the 2ND day of JANUARY, 2006, in the County of
Minnehaha and State of South Dakota aforesaid then

and there did violate SDCL 32-23-1 while previously having been
convicted of SDCL 32-23-1 on or about the 13TH day of

~~MAY, 1998,~~ and on or about the 1ST day of ~~SEPTEMBER,~~
~~1999,~~ and on or about the 19TH day of APRIL, 2000, contrary to
the form of the statute in such case made

and provided and against the peace and dignity of the State of
South Dakota.

Crystal M. Asher

(Deputy) States Attorney of
the County of Minnehaha
State of South Dakota

against the peace and dignity of the State of South Dakota.

Dated this 12th day of January, 2006

"A True Bill"
"A True Bill"

This Indictment has the concurrence of
6 members of the Minnehaha County Grand Jury.

Linda Naugan
Foreman
Minnehaha County Grand Jury

WITNESSES WHO TESTIFIED FOR THE GRAND JURY IN THIS MATTER:
OFFICER STARR ✓

ANTHONY MICHAEL LUND, 11-14-75, 357 N PHILLIPS AVE., #61, SIOUX FALLS,
SD

FILED
JAN 12 2006
Minnehaha County, S.D.
Clerk Court

STATE OF SOUTH DAKOTA)
 :SS
COUNTY OF MINNEHAHA)

IN CIRCUIT COURT
SECOND JUDICIAL CIRCUIT
MAGISTRATE DIVISION

STATE OF SOUTH DAKOTA,

* SFPD 200600242

vs.

* COMPLAINT

ANTHONY MICHAEL LUND,
Defendant.

* 0060021
*

COUNT I DWI THIRD OFFENSE - A CLASS 6 FELONY

COUNT II DWI, OVER .08%; THIRD OFFENSE - A CLASS 6 FELONY

The undersigned being first duly sworn on oath complains and charges:

That the Defendant , ANTHONY MICHAEL LUND
Minnehaha County, State of South Dakota, on or about the 2nd
day of January , 2006 , drove or was in actual physical
control of any vehicle while:

- () having 0.08 percent or more by weight of alcohol in the blood;
- (~~XX~~) under the influence of an alcoholic beverage;
- () under influence of marijuana or any controlled drug or substance to a degree which renders him incapable of safely driving; or
- () under the combined influence of an alcoholic beverage and marijuana or any controlled drug or substance to a degree which renders him incapable of safely driving;

in violation of SDCL 32-23-1,

contrary to the form of the statute in such case made and provided and against the peace and dignity of the State of South Dakota, and prays that the said Defendant may be arrested and dealt with according to law.

COUNT II

That the Defendant , ANTHONY MICHAEL LUND
Minnehaha County, State of South Dakota, on or about the 2nd
day of January , 2006 , drove or was in actual physical
control of any vehicle while:

- (xx) having 0.08 percent or more by weight of alcohol in the blood;
- () under the influence of an alcoholic beverage;
- () under influence of marijuana or any controlled drug or substance to a degree which renders him incapable of safely driving; or
- () under the combined influence of an alcoholic beverage and marijuana or any controlled drug or substance to a degree which renders him incapable of safely driving;

STATE OF SD/CITY OF SIOUX FALLS IN THE MAGISTRATE COURT

vs. LUND COUNTY OF MINNEHAHA
(DEFENDANT) LINCOLN

06-21 NO. SFT 653816

THE UNDERSIGNED PEACE OFFICER COMPLAINS AND STATES THAT

ON OR ABOUT 1-2-06 AT OR NEAR (LOCATION/MILE POST) 41/WALTS AT TIME 0144 P.M.

WITHIN THE COUNTY AND STATE AFORESAID

NAME (LAST FIRST MIDDLE) LUND ANTHONY M HEIGHT 6-2 SEX M

ADDRESS 357 N. PHILLIPS #61 WEIGHT 200 RACE W

CITY SFSD STATE SD BIRTHDATE 11-14-75

DRIVER'S LICENSE NO. H12 066040 STATE SD

DID UNLAWFULLY OPERATE PARK VEHICLE MAKE FORD BODY STYLE VAN

STATE LICENSE NO. 1M2248 YEAR 06 STATE SD

AND THEN AND THERE COMMIT FOLLOWING OFFENSE: TO WIT:

DESCRIBE VIOLATION DWI 402 3rd CDL
C. VEH HAZ. MATERIALS

IN VIOLATION OF SDCL 32-23-4.6

MUNICIPAL
SPEEDING INTERSTATE
 OTHER _____ M.P.H. IN _____ M.P.H. ZONE

OFFICER ISSUING SUMMONS NO. 784 CITY MtW COUNTY TRAFIC STATE _____

DATE _____

ABOVE COMPLAINT IS TRUE AS I VERILY BELIEVE OFFICER SIGN IN PRESENCE OF COURT OR NOTARY

SUBSCRIBED AND SWORN TO ME THIS DATE _____ DATE _____

NAME AND TITLE _____

I PROMISE TO APPEAR DEFENDANT'S SIGNATURE [Signature]

COURT APPEARANCE REQUIRED YES NO \$ _____

POWER OF ATTORNEY YES NO AMOUNT OF DEPOSIT _____

AT (TIME) _____ A.M. _____ P.M. COURT DATE _____ COURT ADDRESS _____

STATE OF SOUTH DAKOTA
 #21 UNIFORM COMPLAINT & SUMMONS 36
 42
 06-0021
 STATE OF SD/CITY OF SIOUX FALLS IN THE MAGISTRATE COURT
 vs.
 LUND (DEFENDANT) 3 COUNTY OF MINNEHAHA
 LINCOLN
 NO. SFT 653814

THE UNDERSIGNED PEACE OFFICER COMPLAINS AND STATES THAT
 ON OR ABOUT 1-2-06 AT OR NEAR (LOCATION/MILE POST) 41 WALTERS AT TIME 0144
 WITHIN THE COUNTY AND STATE AFORESAID

NAME (LAST)	FIRST	MIDDLE	HEIGHT	SEX
LUND	ANTHONY	MICHAEL	63	M
ADDRESS	357 N. PTHUP #61		WEIGHT	RACE
CITY	STATE		200	W
SFSO			BIRTHDATE	
DRIVER'S LICENSE NO.			STATE	
H12 066040			NB	
DID UNLAWFULLY	OPERATE	PARK	VEHICLE MAKE	BODY STYLE
	X		Ford	Van
STATE LICENSE NO.		YEAR	STATE	
1M2248		06	SD	

AND THEN AND THERE COMMIT FOLLOWING OFFENSE: TO WIT:

DESCRIBE VIOLATION: DEVIATING

CDL Y A
 C. VEH Y M E
 HAZ. MATERIALS Y A

IN VIOLATION OF SIOUX FALLS ORD # 40-89

MUNICIPAL
 SPEEDING INTERSTATE
 OTHER

OFFICER ISSUING SUMMONS: STARR
 NO. 704
 CITY: SIOUX FALLS
 COUNTY: MINNEHAHA
 STATE: S.D.
 ABOVE COMPLAINT IS TRUE AS I VERILY BELIEVE
 OFFICER SIGN IN PRESENCE OF COURT OR NOTARY
 DATE: JAN 03 2006

SUBSCRIBED AND SWORN TO ME THIS DATE: [Signature]
 Minnehaha County, S.D.
 NAME AND TITLE: Clerk Circuit Court Magistrate Division
 I PROMISE TO APPEAR
 DEFENDANT'S SIGNATURE: [Signature]
 COURT APPEARANCE REQUIRED: YES NO
 POWER OF ATTORNEY: YES NO
 AMOUNT OF DEPOSIT: \$
 AT (TIME) A.M. P.M. COURT DATE: COURT ADDRESS:

STATE OF SOUTH DAKOTA
UNIFORM COMPLAINT & SUMMONS

STATE OF SD/CITY OF SIOUX FALLS IN THE MAGISTRATE COURT

vs. LUND (DEFENDANT) COUNTY OF MINNEHAHA LINCOLN

NO. SFT 653815

THE UNDERSIGNED PEACE OFFICER COMPLAINS AND STATES THAT

ON OR ABOUT 1-2-00 AT OR NEAR (LOCATION/MILE POST) 41 WALTERS AT TIME 0144 P.M.

WITHIN THE COUNTY AND STATE AFORESAID

NAME (LAST FIRST MIDDLE) LUND ANTHONY M HEIGHT 6-3 SEX M

ADDRESS 357 N PHILLIPS #61 WEIGHT 200 RACE W

CITY SFSO STATE STATE BIRTHDATE 11-14-75

DRIVER'S LICENSE NO. H12 066040 STATE NB

DID UNLAWFULLY OPERATE PARK VEHICLE MAKE BODY STYLE

STATE LICENSE NO. 1M224K YEAR 06 STATE SD

AND THEN AND THERE COMMIT FOLLOWING OFFENSE: TO WIT:

DESCRIBE VIOLATION DRIVING REVOKED CDL YES C. VEH YES HAZ. MATERIALS YES

IN VIOLATION OF SDCL 32-12-65.1

SPEEDING MUNICIPAL INTERSTATE OTHER

OFFICER ISSUING SUMMONS NO. CITY COUNTY STATE

STARRE TONY PTW TRAFFIC DATE 1-2-00

ABOVE COMPLAINT IS TRUE AS I VERILY BELIEVE I A. DATE 1-2-00

OFFICER SIGN IN PRESENCE OF COURT CLERK

SUBSCRIBED AND SWORN TO THIS DATE DATE

NAME AND TITLE Clerk Circuit Court Magistrate Division

I PROMISE TO APPEAR DEFENDANT'S SIGNATURE

COURT APPEARANCE REQUIRED POWER OF ATTORNEY

AT (TIME) COURT DATE COURT ADDRESS

FILED

ARTICLE 20:47

PHYSICIANS AND SURGEONS

Chapter

- 20:47:01 Definitions, Repealed.
- 20:47:02 Operation of board, Transferred.
- 20:47:03 Licensure.
- 20:47:04 Inspections.
- 20:47:05 Declaratory rulings, Transferred.
- 20:47:06 Fees.
- 20:47:07 Medical record documentation
- 20:47:08 Ethics.

CHAPTER 20:47:07

MEDICAL RECORD DOCUMENTATION

Section

- 20:47:07:01 Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain.
- 20:47:07:02 Definition of chronic pain.

20:47:07:01. Standards for medical records when prescribing controlled substances for

the treatment of chronic, non-cancer pain. The standards for medical records when a physician prescribes controlled substances for the treatment of chronic non-cancer pain include each of the following listed items:

- (1) Copies of the signed informed consent and any treatment agreement required by the physician;
- (2) The patient's medical and psychosocial history;
- (3) The results of all physical examinations and all laboratory tests;
- (4) Confirmation that the appropriate state prescription drug monitoring program has been accessed, and the date of that access, or an explanation why it was not accessed; ;
- (5) The results of all risk assessments, including results of any screening instruments used;
- (6) A description of the treatments provided, including all medications prescribed or administered, with the date of prescription or administration, the name and type of the medication, and the dosage and quantity of medication prescribed or administered. The medical records must include all prescription orders for opioid analgesics and other controlled substances, whether written, telephoned, faxed, or electronically transmitted;
- (7) Instructions to the patient, including discussions with the patient and, if appropriate, significant others of the risks and benefits of opioid analgesics, including the risks of addiction, overdose, and death; proper use and storage of medication; proper disposal of unused medications; and the use of naloxone products to reverse overdose;
- (8) Results of ongoing assessments, including, when appropriate, urine drug tests, of patient progress or lack of progress in terms of pain management and functional improvement;
- (9) Notes on any evaluations by and consultations with specialists;

- (10) Any other information used to support the initiation, continuation, revision, or termination of treatment; Any steps taken in response to aberrant medication use by a patient and aberrant behaviors related to a prescription for an opioid analgesic;
- (11) Medical records of past hospitalizations or treatments by other providers, to the extent obtained by the physician;
- (12) Authorization for release of information to other treatment providers; and
- (13) Name, address, and telephone number of the patient's pharmacy.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.

References: Federation of State Medical Boards Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain; Federation of State Medical Boards Model Policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office.

20:47:07:02. Definition of Chronic Pain. For the purposes of section 20:47:07:01, the term, chronic pain, means ongoing, recurrent, or persistent pain lasting beyond the usual course of an acute illness or injury or that is three months or longer in duration.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.



South Dakota Board Of Medical and Osteopathic Examiners

Annual Report FY2016

A summary of Board activities from July 1, 2015 to June 30, 2016.

ABOUT THE BOARD



South Dakota Board of Medical and Osteopathic Examiners

101 N. Main Ave., Suite 301 and 215 Sioux Falls, SD 57104

Phone 605-367-7781

Fax 605-367-7786

www.sdbmoe.gov

sdbmoe@state.sd.us

The Board of Medical and Osteopathic Examiners (Board) protects the health and welfare of the state's citizens by ensuring that qualified medical health care professionals are licensed to practice in South Dakota.

The Board licenses and regulates over 9,000 licenses within fourteen different medical categories. The Board also co-regulates medical professions with the Board of Nursing.

The Board supports and promotes the Health Professionals Advocacy Program which administers a program to advocate for and monitor the recovery and/or rehabilitation of impaired healthcare providers.

The Board has significant authority over licensees and establishing regulations by proposing legislation or adopting administrative rules.

The Board meets quarterly or more often as needed and the meetings are open to the public. The meeting

agenda is posted to the Board website, sdbmoe.gov, and on the front door of the Board office building.

The Board has nine volunteer members appointed by the Governor: six allopathic physicians or doctors of medicine (MD) and one osteopathic physician or doctor of osteopathic medicine (DO), and two non-physicians.

All final decisions are made by the full Board. The Board uses advisory committees, panels, and the board staff to assist with recommendations for final decisions. The advisory committees are approved by the full Board. The Board employs a professional staff comprised of an executive director and support staff to assist the Board in the regulation of its licensees.

The Board is administratively assigned to the South Dakota Department of Health. The Board does not receive a general fund appropriation. It is funded solely with the fees collected from licensing and other services provided by the Board.

MEMBERS OF THE BOARD



Kevin L. Bjordahl, MD
Vice President



Deb K. Bowman



Walter O. Carlson, MD,
MBA; President



Mary S. Carpenter, MD



Laurie B. Landeen, MD



Brent J. Lindbloom,
DO; Secretary



David E. Lust, JD



Jeffrey A. Murray, MD



Elmo J. Rosario, MD

The Board has nine volunteer members: six allopathic physicians, or doctors of medicine (MD), and one osteopathic physician, or doctor of osteopathic medicine (DO), and two non-physician or lay person members (*defined in statute as "...users of the services regulated by the board. One lay member may be a non-physician health care professional licensed by the board"*). All of the Board members are appointed by the Governor. Term limits were enacted by statute in 2005. Members may serve on the board for a three year term with the possibility of two reappointments for a nine year total term limit. In the event of a resignation or death, a board member may be appointed to complete an unexpired term prior to being appointed to their first three year term. Members receive per diem and expenses that follow state reimbursement policies. Annual officer elections are held at a May or June board meeting. Board member biographies are available on the Board's website: www.sdbmoe.gov

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS FY2016 ANNUAL REPORT

<u>BOARD MEMBER</u>	<u>APPOINTMENTS and REAPPOINTMENTS</u>	<u>CURRENT TERM EXPIRATION DATES</u>
Mary Carpenter, MD Winner, SD	2006**, 2013	October 30, 2016
Walter Carlson, MD Sioux Falls, SD	2011, 2014	October 30, 2017
Brent Lindbloom, DO Pierre, SD	2003, 2014	October 30, 2017
Kevin Bjordahl, MD Milbank, SD	2013, 2015	October 30, 2018
Deb Bowman Pierre, SD	2014	October 30, 2016
Elmo Rosario, MD Sioux Falls, SD	2015	October 30, 2018
Laurie Landeen, MD Sioux Falls, SD	2013	October 30, 2016
David Lust, JD Rapid City, SD	2015	October 30, 2018
Jeffrey Murray, MD Sioux Falls, SD	2012*, 2015	October 30, 2017

*Appointed to complete term of
John Vander Woude, MD

**Appointed to complete term of Robert Raszkowski, MD

<u>JUNE 2015 -2016 OFFICERS</u>	<u>ELECTED – RE-ELECTED</u>	<u>EXPIRES</u>
Walter Carlson, MD, MBA, President	June 2016	June 2017
Kevin Bjordahl, MD, Vice President	June 2016	June 2017
Laurie Landeen, MD, Secretary	June 2016	June 2017

EXECUTIVE DIRECTOR'S REPORT

The Board members and staff are committed to protecting the health and welfare of the state's citizens by assuring that only qualified medical professionals are licensed to practice in South Dakota. The regulatory responsibilities of the Board include enforcement of statutes, administrative rules, and practice standards.

Through effective and efficient licensure, the Board protects the public by ensuring that these practitioners have the education, training, and skill to practice safely. By adopting and enforcing regulations, the Board responds to complaints from patients, issues regarding competency, and reports from medical entities, facilities, and other sources. The Board will impose sanctions against licensees who practice below the standards of care or act unprofessionally.

The Board currently administers over 9,500 active licensees in 14 healthcare professions, corporations and limited liability companies within South Dakota. The Board co-regulates advanced practice nurses with the South Dakota Board of Nursing. The Board's administrative functions include the issuance, renewal, and maintenance of over thirty (30) different license types including: licenses, permits, registrations, and certificates. Additional functions include the inspection and investigation of complaints regarding licensees.

From July 1, 2015 to June 30, 2016:

- A total of 1244 new licenses were issued.
- A total of 230 complaint files were opened. The Board places great emphasis on completing timely and fair investigations that result in appropriate action.
- Three (3) administrative rules were adopted to establish continuing education requirements for occupational therapists and occupational therapy assistants, to establish continuing education requirements for nutritionists and dietitians, and to allow first responders to possess opioid antagonists.
- The Board held the following public meetings: five (5) regular meetings, one (1) teleconference meeting, and two (2) administrative rule hearings.
- There were nine (9) administrative law hearings held during the year and the Board made final decisions on the recommendations during one of the public meetings mentioned above.
- OUTREACH EFFORTS: Make life easier for our customers.
 - Education: The executive director and staff continue to meet and provide outreach to medical schools, residency programs, healthcare recruiters, clinic managers, health system administrators, state regulatory boards, and associations as well as with the Board's licensees.
 - In-office assistance for applications: 1,281 requests for "renewal and general questions"
 - Phone and general email totals: 25,553
 - Training Meetings for Academic Program Directors & Coordinators, Healthcare Systems Recruiters, Board & Advisory Members: 1,668

Much has been accomplished in the past year. The Board and its staff continue to seek ways to improve, strengthen, and enhance services provided to the public and licensees. The Board and its staff remain committed to public protection and excellent customer service for South Dakota citizens.

More information about the Board's work is available in the agendas, minutes, reports and website documents.



Margaret B. Hansen, PA-C, MPAS, CMBE
Executive Director

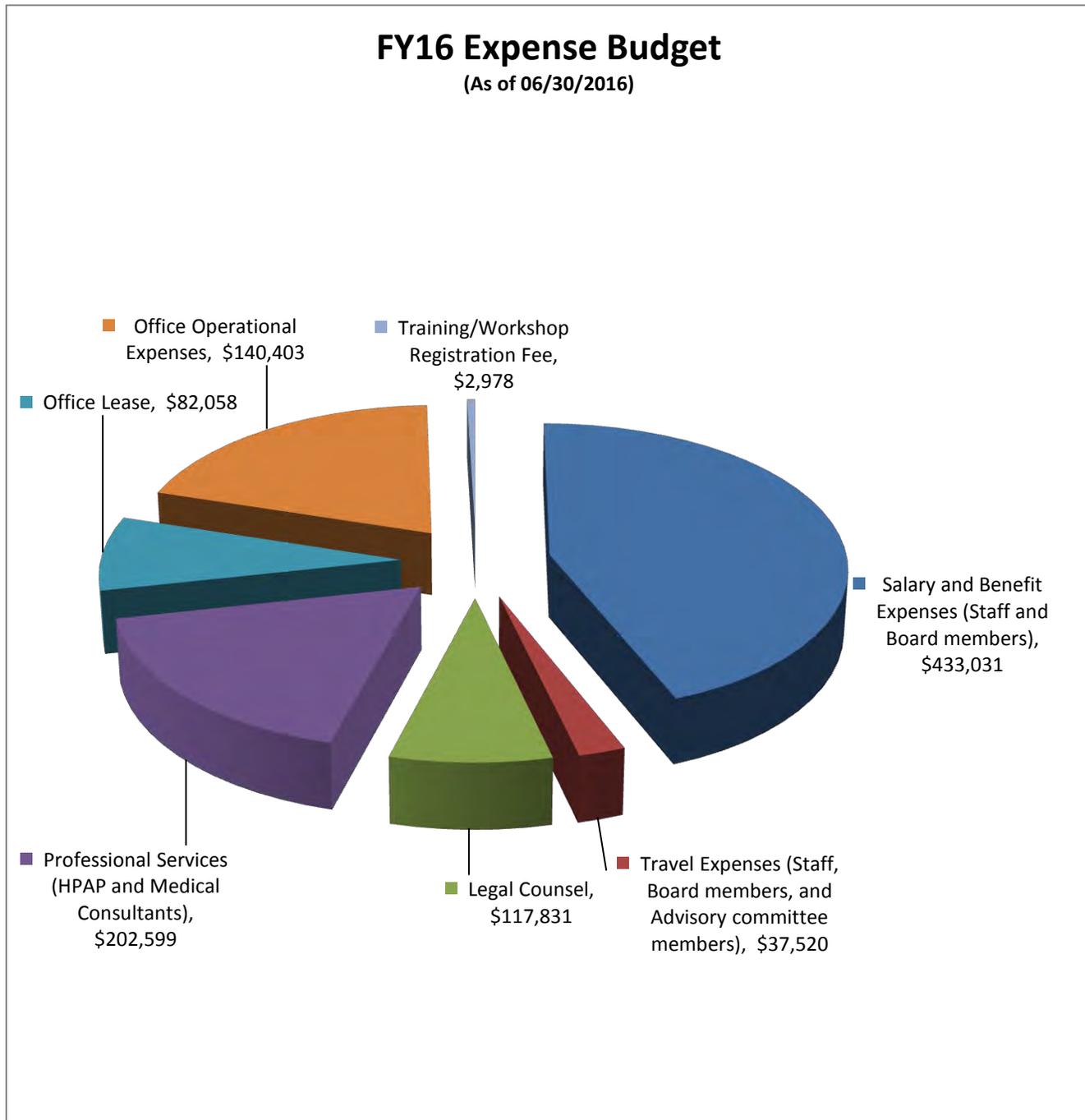
www.sdbmoe.gov

101 N Main Ave Ste 301 Sioux Falls SD 57104

Office 605-367-7781 Cell 605-941-2800

Email: Margaret.Hansen@state.sd.us

FY2016 EXPENSE BUDGET



The Board of Medicine's expense budget for Fiscal year 2015 (July 1, 2014 through June 31, 2015) is \$1,011,493. The FY2015 anticipated revenue is \$1,185,750.

FY2016 MEETING SCHEDULE

MEETINGS

- July 21, 2015
- September 10, 2015
- September 24, 2015
- December 3, 2015
- March 3, 2016
- June 2, 2016

The screenshot displays the website's navigation and content. On the left, there are sections for 'Quick Links' (Home, Account Login, Licensee Look-Up), 'Feedback' (Provide Feedback), and a 'Search' box. Below these is a 'CONTACT US' section with an envelope icon and the text 'questions? we've got answers.' A blue text box below that states: 'Please note that an application fee only extends an initial license to the next renewal date. Initial licenses do vary in duration. It is the responsibility of all licensees to renew their license before expiration. Failure to renew shall result in automatic forfeiture or suspension of the license by statute. Licenses which have forfeited are not automatically entitled to renew.'

The main content area is titled 'Board Information' and includes a navigation bar with 'Board Meeting Info' selected. The 'Board Meeting Info' section contains the following text:

- State law ([SDCL 36-4-4](#)) mandates that the board hold two regular meetings each year. The board may hold other meetings as necessary. Meetings will be posted at this site as they are scheduled.
- Any items requesting Board consideration must arrive well in advance; time is needed to prepare background information and to send materials to Board members prior to meetings. In order to make the best presentation possible, plan ahead.
- Deadline for submission of pre-meeting materials is no later than three weeks prior to Board meeting.
- For additional information, please visit the [South Dakota Boards and Commissions Portal](#)

 A list of meeting dates follows:

- Board Meeting: September 8, 2016
 - Agenda
- 2016 Board Meeting Dates:
 - September 8, 2016
 - December 1, 2016
- 2017 Board Meeting Dates:
 - March 9, 2017
 - June 8, 2017
 - September 14, 2017
 - December 14, 2017
- Meeting Minutes
 - June 2, 2016
 - March 3, 2016
 - December 3, 2015
 - September 24, 2015
 - September 10, 2015
 - July 21, 2015
 - June 11, 2015
 - March 11, 2015
 - December 4, 2014
 - September 11, 2014

On the right side of the page, there is a vertical navigation menu with the following items: Board of Medicine Home, Forms and Helpful Links, Laws and Rules, Licensee Look-Up, Online Verifications, Disciplinary Actions, Board Information (highlighted), Complaints, Interstate Medical License, FAQ, Advanced Life Support (ALS), Athletic Training (AT), Genetic Counselor (GC), Licensed Nutritionist/Dietitian, Medical Assistant (MA), Medical Corporations, Occupational Therapist (OT), Occupational Therapy Assist., PA Corporation, Physical Therapist (PT), Physical Therapist Assistant, Physicians, Physician Assistant (PA), and Respiratory Care Practitioner.

CONTESTED CASE HEARINGS

Pursuant to South Dakota Administrative Rules, an applicant for a license, permit, registration, or certificate issued by the board may file a petition for hearing at any time during the processing of an application. The executive secretary may file a petition for hearing to initiate a disciplinary proceeding against a licensee. A petition for hearing shall be signed by the petitioner and contain the following information: the name and address of the applicant or licensee, the basis for the request for hearing, narration of the applicable statutes or regulations for which the petitioner is requesting board action, and the relief requested by the petitioner.

Upon receipt of a petition for hearing, the board president may appoint an examiner to conduct the contested case hearing, or may schedule the contested case hearing before the board, as authorized by applicable statutes. All petitions for hearing shall be filed with the executive secretary; who shall maintain the record of contested case proceedings held before the board.

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS FY2016 ANNUAL REPORT

Contested case hearings shall be conducted in accordance with SDCL [1-26](#). The parties to a hearing are the executive secretary and the applicant or licensee. A board member who has participated in investigation of the matter before the board shall disqualify himself from all deliberations and decisions. If the board hears the proceeding, it shall issue a final decision and require the parties to submit proposed findings of fact and conclusions of law for consideration at the board's next meeting. If a hearing examiner hears the proceeding, the examiner shall issue a proposed decision including findings of fact and conclusions of law. The examiner shall serve the proposed decision upon the board and the parties. The board shall issue a final decision to accept, reject, or modify the findings, conclusions, and decisions of the examiner. The board shall issue a notice of decision, accompanied by the final board decision and findings of fact and conclusions of law, to the applicant or licensee and executive secretary. The applicant or licensee may appeal a final board action to circuit court, and ultimately to the supreme court of South Dakota.

	2016
Administrative Hearings	9
Hearings before the Board of Medicine	20

ACTIONS OF THE BOARD OF MEDICINE

	FY 2016
Stipulation and Agreement to reinstate license with monitoring	1
Stipulation and Agreement for fitness to practice evaluation	1
Stipulation and Agreement with Reprimand	1
Consent Agreement- Voluntarily Surrender License	1
Consent Agreement with Reprimand	3
Consent Agreement with Reprimand and 90-day suspension	1
Findings of Fact, Conclusions of Law: Initial application withdrawn under investigation	2
Findings of Fact, Conclusions of Law: Issue license with reprimand	1
Findings of Fact, Conclusions of Law: Denial of application	2
Findings of Fact, Conclusions of Law: Revocation of license	1
Findings of Fact, Conclusions of Law: Accept voluntary surrender of license	1
Findings of Fact, Conclusions of Law: Fitness to practice evaluation or denial of application	1
License reinstated without restrictions	2
License withdrawn under investigation	2

ADMINISTRATIVE RULES

The Board of Medical and Osteopathic Examiners administrative rules, which have the weight of law, are found in Articles 20:47, 20:52, 20:61, 20:63, 20:64, 20:66, 20:70, 20:78, 20:82, 20:83 of the South Dakota Administrative Code. Before the Board can adopt a new rule or amend an existing rule, the intended action item must be publicly noticed and reviewed at a public hearing. The proposed change is also subject to review by the Interim Rules Review Committee.

These amendments were noticed and adopted by the Board in FY2016:

- **OCCUPATIONAL THERAPY AND OCCUPATIONAL THERAPY ASSISTANTS – ARTICLE 20:64.** The proposed rule will update outdated language and allow licensees to provide proof of national certification to fulfill continuing education requirements. **NOTICED 1/26/16 | ADOPTED 4/12/16 | EFFECTIVE 5/5/16**
- **BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS – SECTION 20:78:06 OPIOID OVERDOSE PREVENTION.** The proposed rules will provide the criteria for training a first responder in the use of opioid antagonists, requirements for physician's who issue standing orders authorizing a first responder to possess opioid antagonists, and the

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS FY2016 ANNUAL REPORT

requirements for protocols and procedures related to opioid antagonists. **NOTICED 10/30/15 | ADOPTED 12/14/15 | EFFECTIVE 1/7/16**

- **NUTRITION AND DIETETICS – CHAPTER 20:83:01.** The proposed rule will provide for the requirements, reporting method, and waiver option for nutrition and dietetics continuing education. **NOTICED 1/26/16 | ADOPTED 4/12/16 | EFFECTIVE 5/5/16**

LEGISLATION

The Board of Medical and Osteopathic Examiners will request that the legislature amend existing laws or establish new laws that are relevant to the professions regulated by the board. The Board of Medical and Osteopathic Examiners will enact statutes and rules as established by the legislature.

This legislation was approved in 2016:

HOUSE BILL 1069 – The purpose of this legislation was to revise certain provisions related to the genetic counselor license

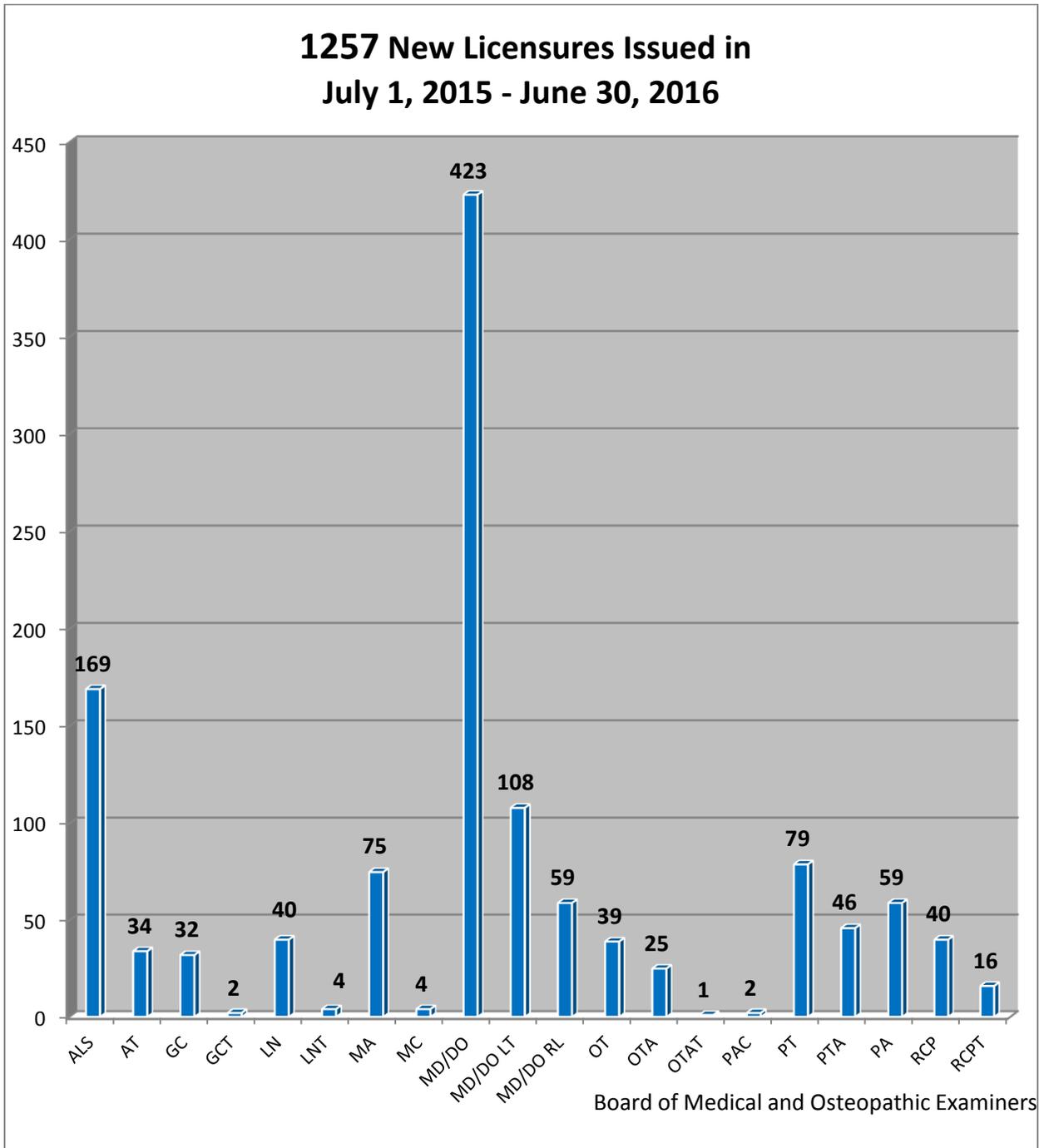
Health Professionals Assistance Program

Since 1996, the South Dakota Health Professionals Assistance Program (HPAP) has assisted hundreds of healthcare providers with recovery and the ability to return to practice. HPAP believes that early intervention, and comprehensive accurate evaluations, combined with ongoing case management and support of treatment efforts, offers the best opportunity for successful outcomes. HPAP is a confidential program designed for regulated health professionals who hold, or are eligible to hold, licensure with the SD Board of Nursing, SD Board of Medical and Osteopathic Examiners, SD Board of Pharmacy and/or the SD Board of Dentistry. Services include general outreach, crisis intervention, informal assessment, treatment monitoring, and support for providers who need assistance.

For more information see: <http://www.mwhms.com/> for the South Dakota statutes see

http://legis.sd.gov/Statutes/Codified_Laws/DisplayStatute.aspx?Statute=36-2A&Type=Statute

Statistics

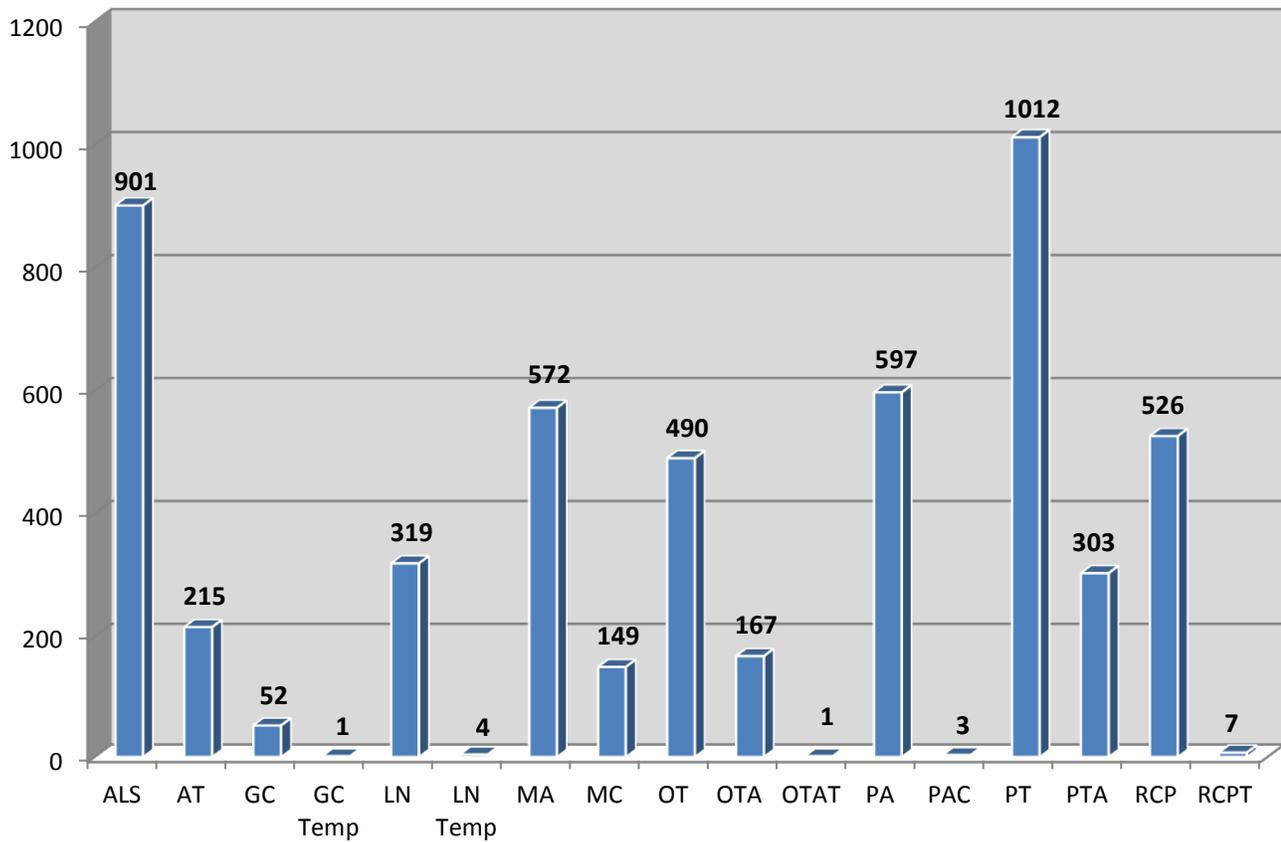


ALS – Advanced Life Support (EMT)
 AT – Athletic Trainer
 GC – Genetic Counselor
 GCT – Genetic Counselor Temp
 LN – Licensed Nutritionist
 LNT – Licensed Nutritionist Temp
 MA – Medical Assistant
 MC – Medical Corporation
 MD/DO – Medical License
 MD/DO LT – Physician Locums Tenens
 MD/DO RL – Resident License

OT – Occupational Therapist
 OTA – Occupational Therapy Assistant
 OTAT – Occupational Therapy Assistant Temp
 PT – Physical Therapist
 PTA – Physical Therapist Assistant
 PA – Physician Assistant
 PAC – Physician Assistant Corporation
 RCP – Respiratory Therapy
 RCPT – Respiratory Therapy Temp

Board of Medical and Osteopathic
Examiners

Current Non-Physician Counts (As of 07/06/16)



ALS – Advanced Life Support (EMT)

AT – Athletic Trainer

GC – Genetic Counselor

GC Temp – Genetic Counselor Temporary License

LN – Licensed Nutritionist

LN Temp – Nutritionist Temporary Permit

MA – Medical Assistant

MC – Medical Corporation

OT – Occupational Therapist

OTA – Occupational Therapy Assistant

OTAT – OT Assistant Temporary Permit

PA – Physician Assistant

PAC – PA Corporation Registration

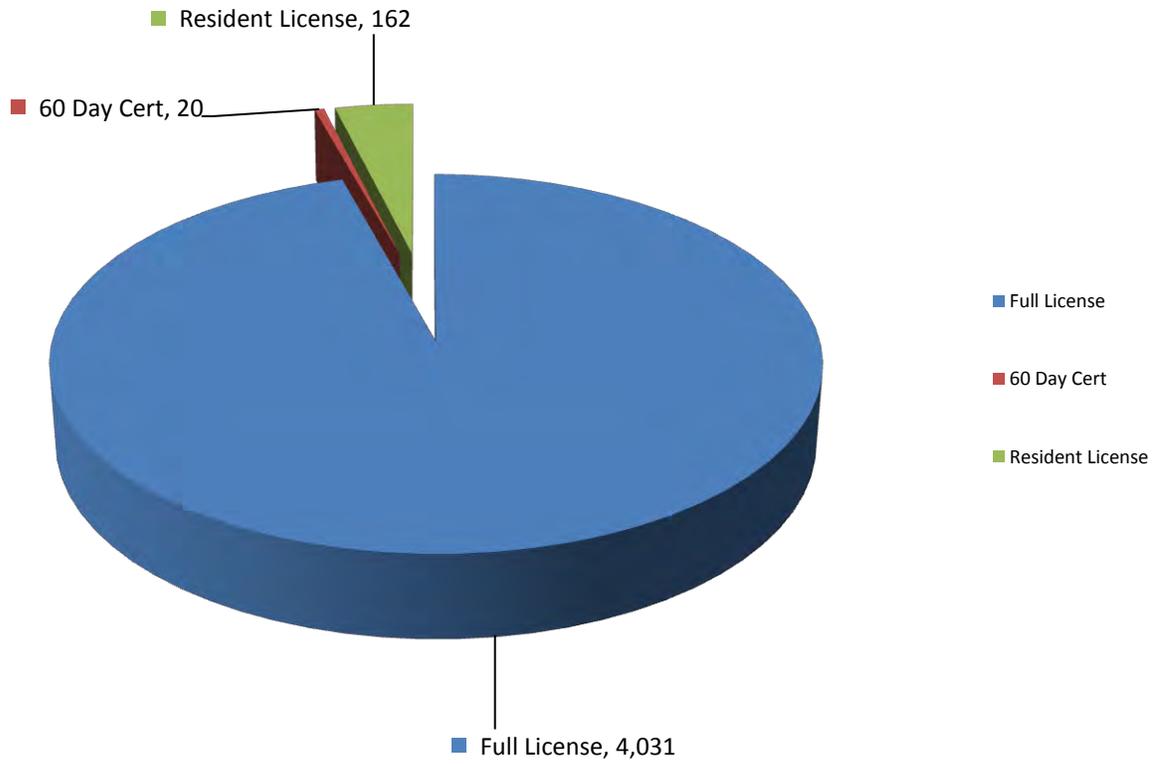
PT – Physical Therapist

PTA – Physical Therapist Assistant

RCP – Respirator Care Practitioner

RCPT – Respiratory Care Practitioner Temp Permit

Current MD/DO Counts (As of 07/06/16)



BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS FY2015 ANNUAL REPORT

License Type:	FY13	FY14	FY15	FY16
Advanced Life Support	808	992	937	901
Athletic Trainer	179	218	234	215
Genetic Counselor	12	17	33	52
Genetic Counselor Temp	1	0	2	1
Licensed Nutritionist	290	316	320	319
Licensed Nutritionist Temp	5	3	6	4
Medical Assistant	607	575	651	572
Medical Corporation	174	165	164	149
Medical License	3,674	3,717	3,854	4031
Physician Locums Tenens	13	9	11	20
Resident License	127	162	220	162
Occupational Therapist	458	464	470	490
Occupational Therapy Temp	1	0	0	0
Occupational Therapy Assistant	147	148	160	167
Occupational Therapy Assistant Temp	0	0	1	1
Physical Therapist	885	906	966	1012
Physical Therapist Assistant	237	251	273	597
Physician Assistant	507	530	561	597
Physician Assistant Temp	0	0	0	0
Respiratory Therapy	480	511	485	526
Respiratory Therapy Temp	3	9	5	7
Total	8,608	8,993	9,353	9,532

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS FY2015 ANNUAL REPORT

The Board of Medicine is fortunate to have dedicated, competent personnel who take their jobs – and the Board’s mission – seriously. Every day, these men and women perform licensure and regulatory enforcement duties that enable the Board to protect the health of South Dakotans.

SOUTH DAKOTA BOARD OF MEDICAL & OSTEOPATHIC EXAMINERS

101 N Main Avenue, Suite 301
Sioux Falls, SD 57104

Hours: 8:00 a.m. to 5:00 p.m., Monday – Friday

Phone: 605-367-7781

Fax: 605-367-7786

Email: sdbmoe@state.sd.us

Website: www.sdbmoe.gov

ADMINISTRATION

Margaret B. Hansen, PA-C, MPAS, CMBE
Executive Director

Lisa Andersen
Secretary

Tyler Klatt, MPA
Management Analyst

Jane Phalen
Board Coordinator

ENFORCEMENT

Misty Rallis, RN
Board Investigator

LICENSURE

Elise Ellenz
Licensing Specialist

Jessica Gulbrandson
Licensing Specialist

Randi Sterling
Head Licensing and Business Specialist

SOUTH DAKOTA HEALTH PROFESSIONAL ASSISTANCE PROGRAM

Maria Eining
Program Coordinator

SOUTH DAKOTA ATTORNEY GENERAL’S OFFICE

William Golden, JD
Board staff attorney

Ellie Bailey, JD
Board staff attorney

Steven Blair, JD
Board attorney

COVER ARTWORK: The medical team representing the Board’s regulated professions. *Shutterstock*

ARTICLE 20:82
GENETIC COUNSELORS

CHAPTER 20:82:04

SUPERVISION

Section

20:66:03:01 Supervision registration.

20:66:03:01 Supervision registration No genetic counselor may act as a supervising genetic counselor for any temporary genetic counselor license holder who is a member of the genetic counselor's immediate family unless specific authorization for such supervision has been approved by the Board. For purposes of this section, immediate family means a spouse, parent, child, or sibling of the supervising physician or other persons with whom the physician lives or commingles assets.

Source:

General Authority: SDCL 36-36-12

Law Implemented: SDCL 36-36-9, 36-36-10

WHEREAS, it is the intent of this agreed-upon disposition to provide for a settlement of the licensing issues presented by the Licensee's conduct in a professional manner, without the necessity of further hearings and proceedings herein, and to provide for a responsible resolution;

NOW, THEREFORE, it is hereby stipulated and agreed as follows:

1. That the Boards have jurisdiction over the person of the Licensee and the subject matter of this Order.

2. The Boards assert that the Licensee, while working as a certified nurse midwife did not adequately follow out-of-hospital waiver guidelines by failing to refer prenatal condition for size/date discrepancy and for failure to provide adequate prenatal visits. Licensee neither admits nor denies the Boards assertions.

3. The Licensee recognizes that the matters complained of are of a nature that would constitute grounds for discipline of her license to practice as a certified nurse midwife in the State of South Dakota under SDCL § 36-9A-29.

4. That the Licensee understands that she has a right to a contested hearing case pursuant to SDCL Ch. 1-26 regarding the allegations in the pending complaint and that such rights under SDCL Ch. 1-26 include, but are not limited to, the right to be present at the contested case hearing, the right to be represented by legal counsel, to introduce evidence and testimony on her behalf, to call witnesses, to cross examine witnesses, and to inspect all documentary evidence submitted to the Boards and to appeal the Boards' decision to the circuit court and state Supreme Court as provided by law.

5. By entering into this agreed-upon disposition with the Boards, the Licensee hereby knowingly and voluntarily waives the above rights.

6. The Licensee has been given the opportunity to discuss this stipulation with an attorney of Licensee's choice and is aware of her rights as outlined above. Licensee hereby voluntarily waives all such rights to a hearing, notice, appearance, or other rights. Licensee is entering into this stipulation voluntarily and without duress or compulsion.

Based upon the foregoing acknowledgements, the Boards and the Licensee hereby agree that this pending complaint will be resolved as follows:

LETTER OF REPRIMAND WITH REMEDIATION

That as of the date of this stipulation, the Boards, according to the disciplinary procedures outlined in ARSD 20:62:06 issues this Letter of Reprimand. In addition, the Boards require you to complete the following remediation modules:

1. Antepartum Testing & Prenatal Diagnosis
[http://www.nccwebsite.org/Self-Assessment/
WB1613AntepartumTestingPrenatalDiagnosis.aspx](http://www.nccwebsite.org/Self-Assessment/WB1613AntepartumTestingPrenatalDiagnosis.aspx)
2. Maternal Risk Factors
[http://www.nccwebsite.org/Self-Assessment/
GH216MaternalRiskFactors.aspx](http://www.nccwebsite.org/Self-Assessment/GH216MaternalRiskFactors.aspx)

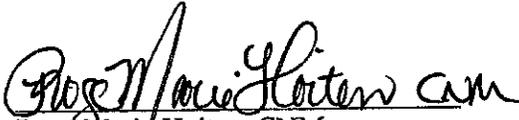
Licensee is responsible for purchasing and completing the above-referenced modules and returning evidence of completion to the Board of Nursing office no later than sixty (60) days from the approval of this agreement by the Boards.

CONDITIONS

1. If the Licensee fails to complete any of the terms of this agreed-upon disposition, the Boards may take such action against Licensee's license as the Boards deem necessary, up to and including an immediate suspension, additional terms, revocation, or other disciplinary action.
2. Licensee shall not violate any laws or regulations regarding the practice of nursing.
3. This agreed-upon disposition is subject to public reporting.

NOW, THEREFORE, the foregoing Agreed Upon Disposition and Waiver of Hearing is entered into and is respectfully submitted to the Boards with the request that the Boards adopt its terms as an Order of the Boards in the above matter.

Dated this 18th day of June, 2016.


Rose Marie Hoiten, CNM

Agreed Upon Disposition and Waiver of Hearing
Licensee: Rose Marie Holten, CNM

The South Dakota Board of Nursing met on the 22nd day of April, 2016,
and approved the terms and conditions of this Letter of Reprimand with Remediation by a vote
of 8-0 and issued its Order as follows:

IT IS HEREBY ORDERED that the above Agreed Upon Disposition and Waiver of
Hearing is adopted as shown herein by the South Dakota Board of Nursing this 14th day of
June, 2016.

SOUTH DAKOTA BOARD OF NURSING

Gloria Damgaard
Gloria Damgaard, Executive Director

Agreed Upon Disposition and Waiver of Hearing
Licensee: Rose Marie Hoiten, CNM

The South Dakota Board of Medical and Osteopathic Examiners met on the ____ day of _____, 2016, and approved the terms and conditions of this Letter of Reprimand and issued its Order as follows:

IT IS HEREBY ORDERED that the above Agreed Upon Disposition and Waiver of Hearing is adopted as shown herein by the South Dakota Board of Medical and Osteopathic Examiners this ____ day of _____, 2016.

SOUTH DAKOTA BOARD OF MEDICAL &
OSTEOPATHIC EXAMINERS

Board President

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

July 2016

By BMOE Staff

LICENSING: Ensure only qualified professionals are licensed and allowed to practice.

Current/Past Events:

Training and Meetings attended

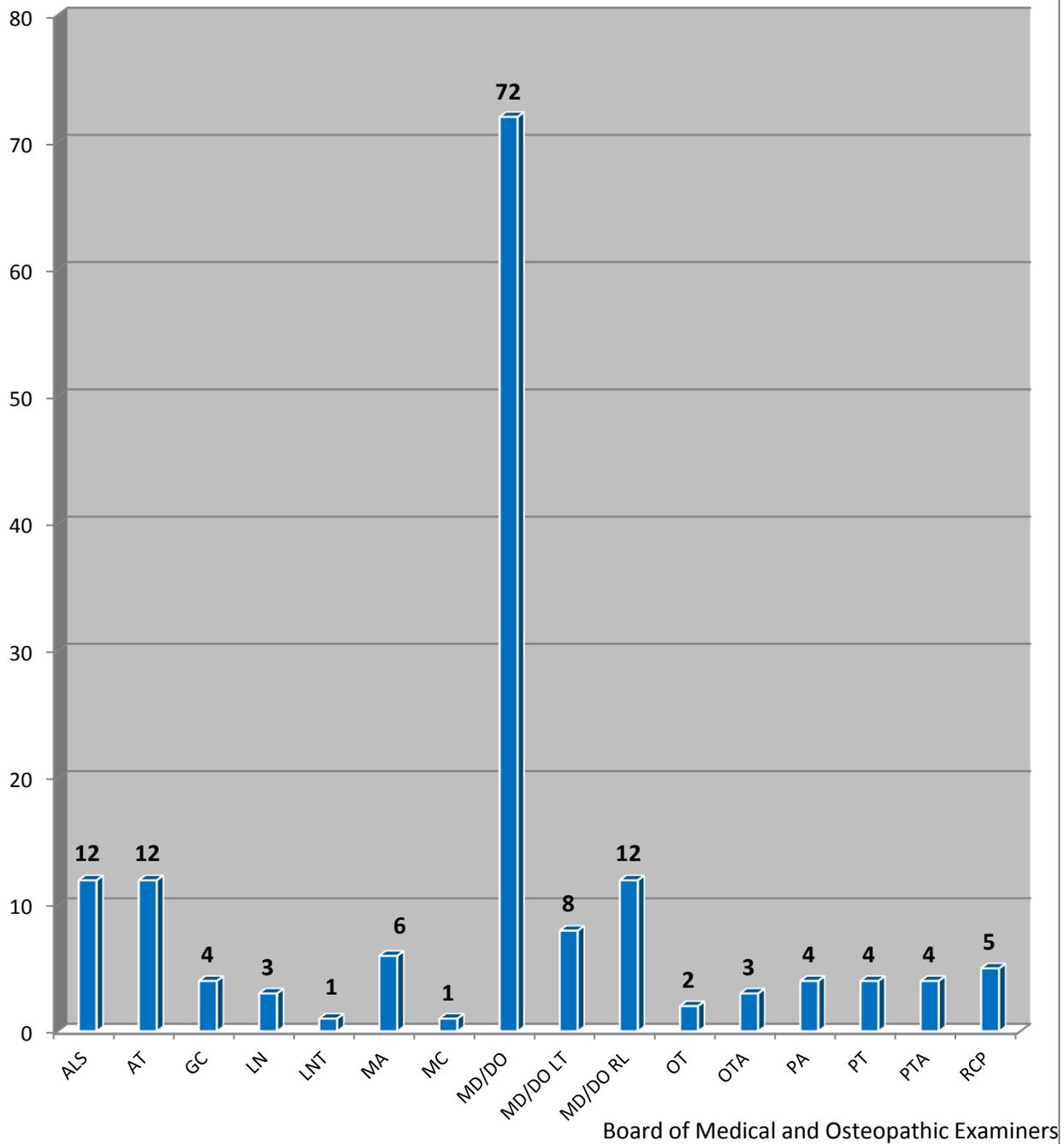
The database vendor, Albertson Consulting continues the process of transferring BMOE data to its Big Picture product. Weekly phone conference call updates continue with the Board staff and the Albertson Consulting project manager and transition team.

Current and Upcoming Advisory Committee and Staff Meetings:

- Advisory Committee Meeting Schedule
 - Advanced Life Support Advisory Committee – no date scheduled
 - Athletic Trainer Advisory Committee – August 2nd
 - Genetic Counselor Advisory Committee – August 8^h
 - Nutrition and Dietetics Advisory Committee – August 10th
 - Occupational Therapy Advisory Committee – August 9th
 - Physical Therapy Advisory Committee – August 18th
 - Physician Assistant – August 8th
 - Respiratory Care Practitioners – August 23rd

Statistics

153 New Licensures Issued in July 2016



ALS – Advanced Life Support
AT – Athletic Trainer

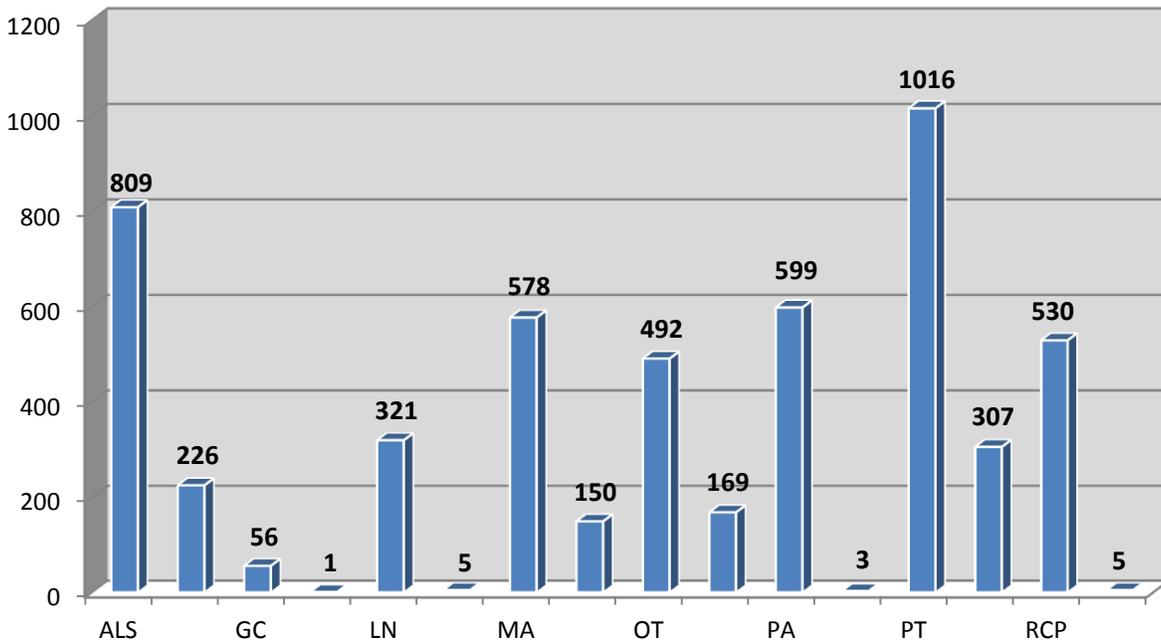
MD/DO RL – Resident Medical License
OT – Occupational Therapist

GC – Genetic Counselor
LN – Licensed Nutritionist/ Dietitian
LNT – Licensed Nutritionist/ Dietitian Temp
MA – Medical Assistant
MD/DO – Medical License
MD/DO LT – Physician Locums Tenens

OTA – Occupational Therapy Assistant
PA – Physician Assistant
PT – Physical Therapist
PTA – Physical Therapist Assistant
RCP – Respiratory Care Practitioner

Current Non-Physician Counts

(As of 07/27/2016)

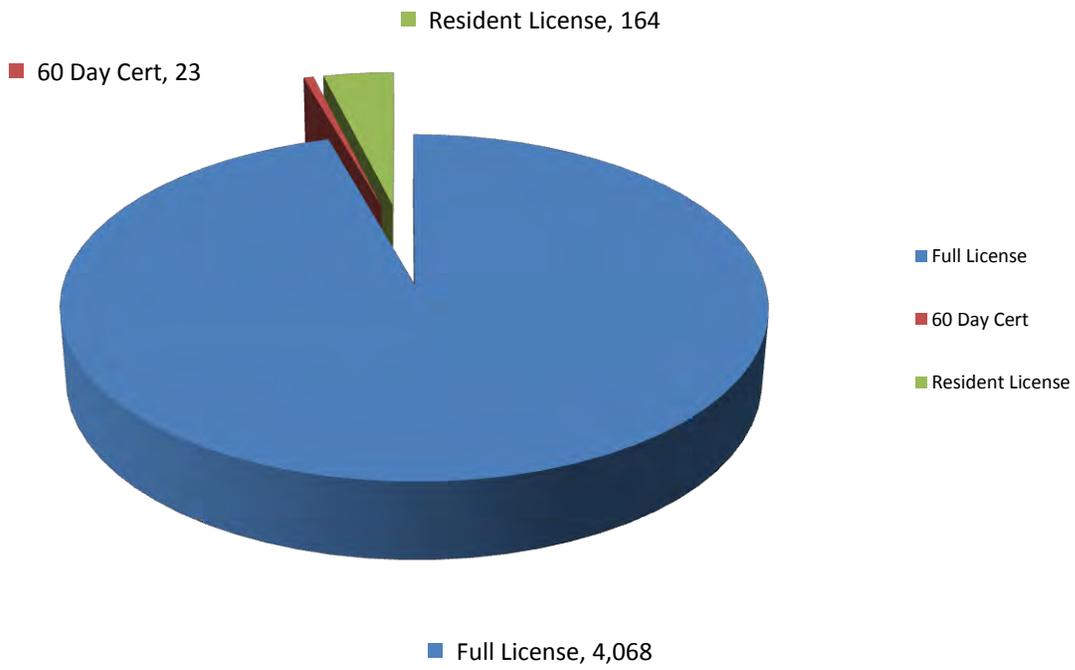


ALS – Advanced Life Support
AT – Athletic Trainer
GC – Genetic Counselor
LN – Licensed Nutritionist
MA – Medical Assistant
MC – Medical Corporation
OT – Occupational Therapist

OTA – Occupational Therapy Assistant
PA – Physician Assistant
PAC – Physician Assistant Corporation
PT – Physical Therapist
PTA – Physical Therapist Assistant
RCP – Respirator Care Practitioner

Current MD/DO Counts

(As of 07/27/2016)



INVESTIGATIONS: Ensure complaints and issues are properly investigated and resolved.

Issues

Complaints:

Summary of new applications

- 1.) New Licenses were issued
 - a. 153 new licenses issued
 - b. 33 complex applications resolved or closed

Statistics

**Investigations and Complaints
(As of 07/27/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Resolved</u>
Complex Applications	23	86	33
Complaints/ Investigations	19	51	29
Competency (Malpractice cases)	0	423	0

**Reinstatement and Renewal Applications
(As of 07/27/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Completed</u>
Reinstatement and Renewal Applications	9	25	18

OUTREACH: Make life easier for our customers.

Education

The Executive Director and Board staff continues to meet and do outreach to the medical school, residency programs, healthcare recruiters, clinic managers, health system administrators, state regulatory boards and associations as well as with the SDBMOE licensees.

Outreach Efforts:

Outreach Activities

(Totals reflect activities from first to last day of month)

Activity	Organization	# Participants	Topic Covered
Training	Academic Program (Residency) Directors & Coordinators. Healthcare Systems Recruiter. Board & Advisory Members	121	Licensing discussion
Phone/General Email	Licensees/ Applicants	525	General questions
In-Office Assistance	Licensees/ Applicants	165	Renewal and general questions

Upcoming Events:

- **2016 Meeting Dates**
 - September 8 and December 1
- **2017 Meeting Dates**
 - March 9, June 8, September 14, and December 14
- **2018 Meeting Dates**
 - March 8, June 14, September 13, and December 13

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

June 2016

By BMOE Staff

LICENSING: Ensure only qualified professionals are licensed and allowed to practice.

Current/Past Events:

Training and Meetings attended

The database vendor, Albertson Consulting continues the process of transferring BMOE data to its Big Picture product. Weekly phone conference call updates continue with the Board staff and the Albertson Consulting project manager and transition team.

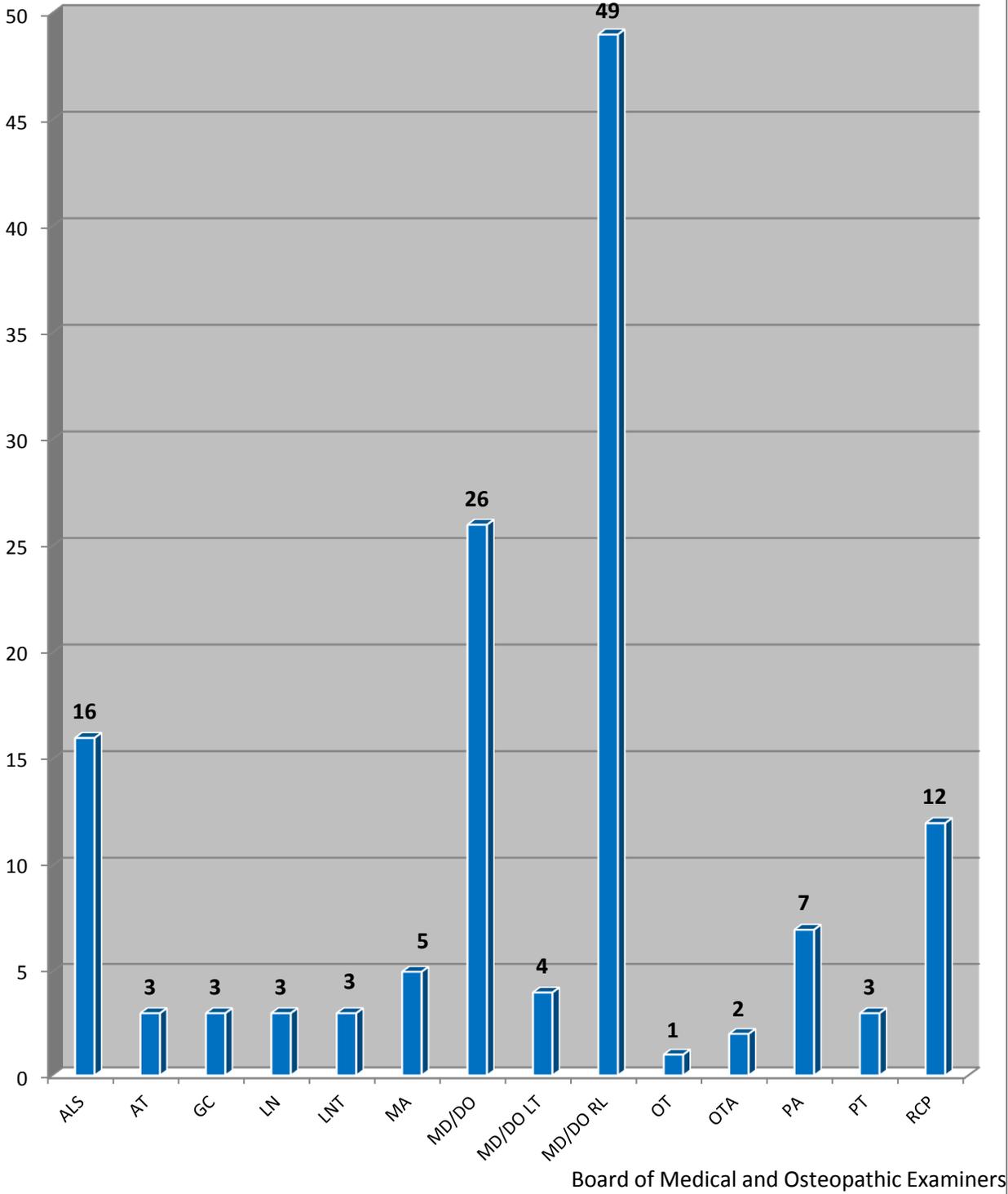
The June Board meeting was held and those draft minutes are attached to the end of this report.

Current and Upcoming Advisory Committee and Staff Meetings:

- Advisory Committee Meeting Schedule
 - Advanced Life Support Advisory Committee – no date scheduled
 - Athletic Trainer Advisory Committee – August 2nd
 - Genetic Counselor Advisory Committee – August 4th
 - Nutrition and Dietetics Advisory Committee – August 10th
 - Occupational Therapy Advisory Committee – August 9th
 - Physical Therapy Advisory Committee – no date scheduled
 - Physician Assistant – August 8th
 - Respiratory Care Practitioners – August 23rd

Statistics

137 New Licensures Issued in June 2016



ALS – Advanced Life Support

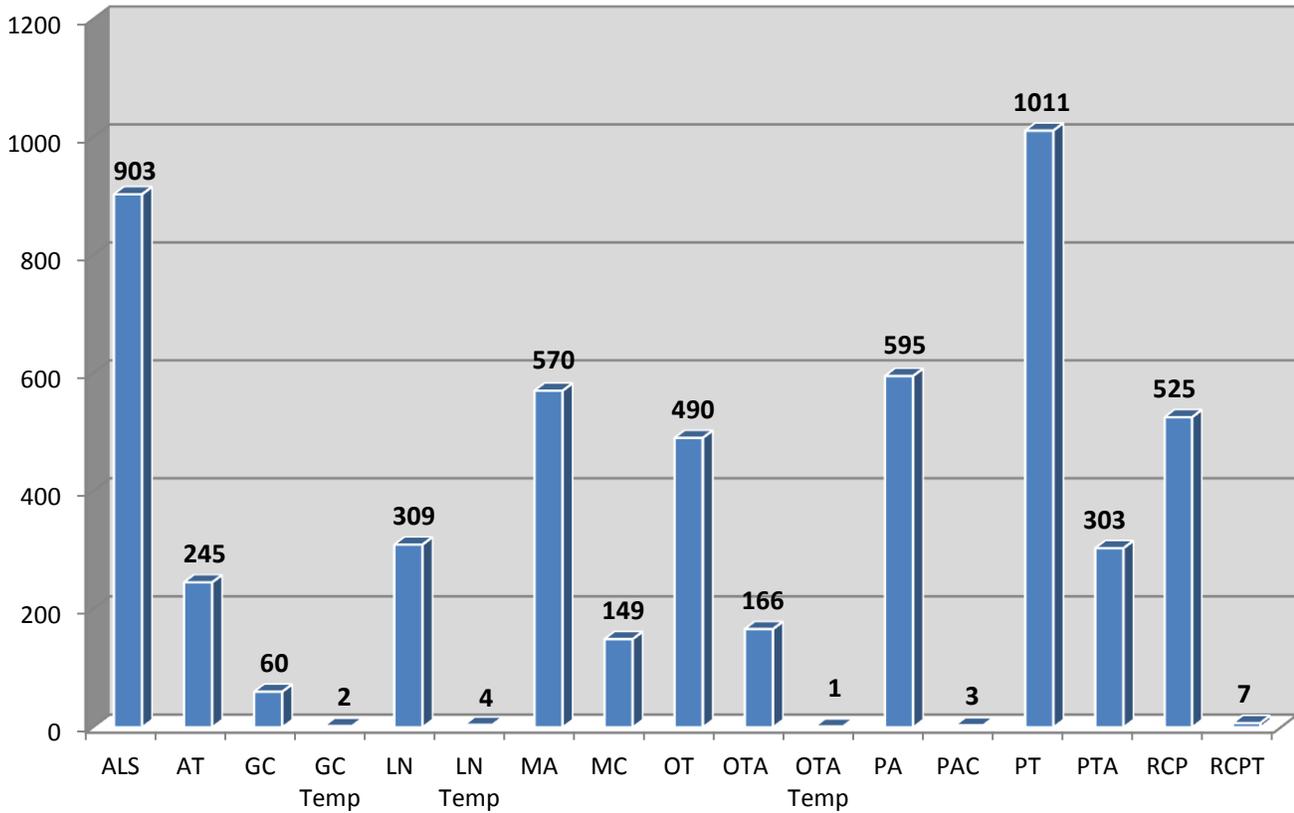
MD/DO RL – Resident Medical License

AT – Athletic Trainer
GC – Genetic Counselor
LN – Licensed Nutritionist/ Dietitian
LNT – Licensed Nutritionist/ Dietitian Temp
MA – Medical Assistant
MD/DO – Medical License
MD/DO LT – Physician Locums Tenens

OT – Occupational Therapist
OTA – Occupational Therapy Assistant
PA – Physician Assistant
PT – Physical Therapist
PTA – Physical Therapist Assistant
RCP – Respiratory Care Practitioner

Current Non-Physician Counts

(As of 06/30/2016)

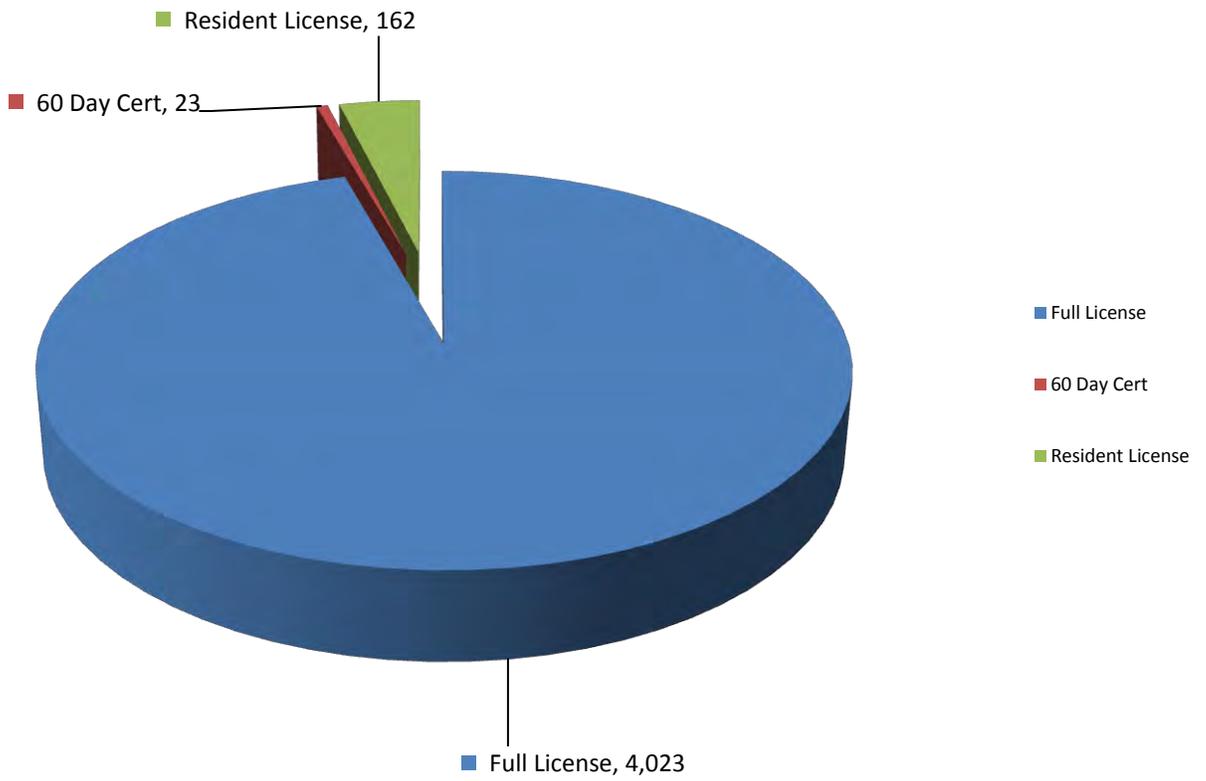


ALS – Advanced Life Support
AT – Athletic Trainer
GC – Genetic Counselor
LN – Licensed Nutritionist
MA – Medical Assistant
MC – Medical Corporation
OT – Occupational Therapist

OTA – Occupational Therapy Assistant
PA – Physician Assistant
PAC – Physician Assistant Corporation
PT – Physical Therapist
PTA – Physical Therapist Assistant
RCP – Respirator Care Practitioner

Current MD/DO Counts

(As of 06/30/2016)



INVESTIGATIONS: Ensure complaints and issues are properly investigated and resolved.

Issues

Complaints:

Summary of new applications

- 1.) New Licenses were issued
 - a. 137 new licenses issued
 - b. 24 complex applications resolved or closed

Statistics

**Investigations and Complaints
(As of 06/30/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Resolved</u>
Complex Applications	13	86	24
Complaints/ Investigations	27	47	34
Competency (Malpractice cases)	0	417	0

**Reinstatement and Renewal Applications
(As of 06/30/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Completed</u>
Reinstatement and Renewal Applications	4	25	9

OUTREACH: Make life easier for our customers.

Education

The Executive Director and Board staff continues to meet and do outreach to the medical school, residency programs, healthcare recruiters, clinic managers, health system administrators, state regulatory boards and associations as well as with the SDBMOE licensees.

Outreach Efforts:

Outreach Activities

(Totals reflect activities from first to last day of month)

Activity	Organization	# Participants	Topic Covered
Training	Academic Program (Residency) Directors & Coordinators. Healthcare Systems Recruiter. Board & Advisory Members	114	Licensing discussion
Phone/General Email	Licensees/ Applicants	502	General questions
In-Office Assistance	Licensees/ Applicants	170	Renewal and general questions

Upcoming Events:

- **2016 Meeting Dates**
 - September 8 and December 1
- **2017 Meeting Dates**
 - March 9, June 8, September 14, and December 14
- **2018 Meeting Dates**
 - March 8, June 14, September 13, and December 13

Unapproved Draft Minutes

Thursday, June 2, 2016 - 9:00 am (CDT)

Boards Members:

Present: Kevin Bjordahl, MD; Walter Carlson, MD; Mary Carpenter, MD; Laurie Landeen, MD; Brent Lindbloom, DO; Mr. David Lust; Jeffrey Murray, MD; Elmo Rosario, MD

Absent: Ms. Deb Bowman

Board Staff:

Present: Margaret Hansen, PA-C; Mr. Tyler Klatt; Ms. Jane Phalen; Ms. Misty Rallis

Counsel:

Present: Assistant AG Steven Blair (Board), Assistant AG Ellie Bailey (Staff)

Attendees:

Ste. 215: Physician assistant Mr. Clint Perman, Physician assistant Ms. Louise Papka, president South Dakota Physician Assistant Academy (SDAPA); Mr. Mark East, South Dakota State Medical Association (SDSMA)

Public DDN site: Rapid City: Mr. Jason Culberson, Paramedic, Pierre: Mr. Tim Engel, SD Medical Association Attorney

The meeting was a public meeting and other individuals may have been present.

Dr. Walter Carlson, president of the Board, called the meeting to order at 9:00 am. Roll was called and a quorum was confirmed.

Motions to approve the following were made and ratified by roll call vote:

- June 2, 2016 agenda (Landeen/unanimous)
- March 3, 2016, Board meeting minutes (Landeen/unanimous)
- March 1, 2016 through May 31, 2016 new licensure list (Landeen/unanimous)
- Financial report (Bjordahl/unanimous)
- Advisory Committee:
 - Physician Assistant new member: Mr. Clint Perman, PA-C (Landeen/unanimous)
 - Genetic Counselor re-appointments: Dr. Maria Palmquist and Mr. Quinn Stein, GC, (Murray/unanimous)
- Yankton County EMT Services AEMTs: Jean Scherschligt, Michael Slowey, and Kimberly Velk petitioned the board for an expansion of scope to include: diphenhydramine and Zofran (ondansetron) (IV), epinephrine 1:10,000 (IV/IO) and adult therapy by intraosseous infusion devices in emergent situations. These AEMTs will first complete education and training, and attend an ACLS and PALS course, and they will be required to complete continuing education in order to maintain competency. (Landeen/unanimous)
- Rapid City Fire Department mobile medic program petition extension of temporary approval order to the September meeting (Carpenter/unanimous)
 - Direct board staff to edit Protocol 9: Assessment to include language for the protocol to follow, and the form to use, when the patient refuses assessment by the mobile medic (Carpenter/unanimous)
- Hearings – assigned board member does not participate in discussion or vote:
 - Public:
 - Paramedic Curt Hasart: adopt administrative law judge’s Findings of Fact, Conclusions of Law and recommendation to accept the voluntary surrender of paramedic license (Landeen/unanimous, assigned Board member Erickson no longer on the Board)
 - Paramedic Wade Wells: adopt administrative law judge’s Findings of Fact, Conclusions of Law and recommendation to approve the Consent Agreement with Reprimand and 90-Day Suspension (Landeen/unanimous; assigned Board member Dr. Carlson abstained)
 - Certified Nurse Midwife Suzanne Ryan: approve Board of Nursing recommendation to reinstate the CNM license (Bjordahl/unanimous; assigned Board member Dr. Carlson abstained)
 - Closed physician hearings are confidential until final action is taken pursuant to SDCL 36-4-31.5:
 - Grady Reynolds Fort, MD: adopt administrative law judge’s Findings of Fact, Conclusions of Law and recommendation: accept the request to withdraw application while under investigation (Landeen/unanimous; assigned Board member Dr. Lindbloom abstained)
 - Kip Cardell Newell, DO: adopt administrative law judge’s Findings of Fact, Conclusions of Law and recommendation to deny the application (Landeen/unanimous; assigned Board member Deborah Bowman was absent to the meeting)
 - Robert John Gustafson, MD: approve the agreement to accept the medical license as withdrawn under investigation (Landeen/unanimous; no Board member assigned to this case)
 - Stephen Charles Myers, MD: : adopt administrative law judge’s Findings of Fact, Conclusions of Law and recommendation: reprimand (Bjordahl/unanimous; assigned Board member Dr. Laurie Landeen abstained)
- Changes to South Dakota statute:

- SDCL 36-4-20.4: Duration of Locum Tenens Certificate accepted as presented by staff and to move forward with the Department of Health (DOH) legislative process (Carpenter/unanimous)
 - SDCL 36-4: Board staff, with Mr. David Lust, to draft and bring back to the September meeting: a new statute authorizing the Board to use funds for educational opportunities (Landeem/unanimous)
- Changes to South Dakota administrative rules:
 - Supervision of family members: table item and staff was directed to do further research as to how common the situation might be with all the professions affected, draft language for both supervisors (e.g. the physician) and the supervisees (e.g. PA, paramedic, athletic trainer, etc.) bring everything back to the September meeting: (Lust/unanimous)
 - Medical record documentation: SDSMA White Paper on Pain Management and Prescription Drug Abuse will not be put into rule but will be used as a guideline for staff to evaluate complaints. Direct the staff to prepare the language and include chronic pain definition for a rules hearing at the September meeting (Landeem/unanimous)
 - Genetic Counselor continuing education requirements as presented by staff: move forward for an administrative rules hearing (Carpenter/unanimous)
- Annual election of officers:
 - Continue with the current slate for president and vice president: Dr. Walter Carlson and Dr. Kevin Bjordahl respectively (Landeem/unanimous)
 - Dr. Laurie Landeem elected as secretary of Board (Carpenter/unanimous)
- Executive session pursuant to SDCL 1-25-2(3) to consult with legal counsel (Murray/unanimous) entered at 11:45 am and the public meeting resumed at 1:00 p.m.

Reports accepted for information:

- Advisory Committee Business
- Executive Director
- Complaints and investigations docket

The meeting adjourned at 2:00 pm CDT.

¹ 1-27-1.17. Draft minutes of public meeting to be available--Exceptions--Violation as misdemeanor. The unapproved, draft minutes of any public meeting held pursuant to § 1-25-1 that are required to be kept by law shall be available for inspection by any person within ten business days after the meeting. However, this section does not apply if an audio or video recording of the meeting is available to the public on the governing body's website within five business days after the meeting. A violation of this section is a Class 2 misdemeanor. However, the provisions of this section do not apply to draft minutes of contested case proceedings held in accordance with the provisions of chapter 1-26.



August 19, 2016

Ms. Margaret Hansen, PA-C, MPAS
Executive Director
SDBOME
101 N Main Avenue Suite 301
Sioux Falls, SD 57104

Dear Ms. Hansen:

As per our recent telephone conversation regarding the fees charged for verification of medical licensure, I am requesting that the Board of Medical and Osteopathic Examiners consider the request to discontinue the practice of charging for this information.

Independent Healthcare Associates is a physician hospital organization in Sioux Falls with members in Sioux Falls, Yankton and Watertown. One of the services we provide to our members is credentialing with third-party payers. Part of the credentialing process requires the verification of information provided by physicians and other medical providers prior to accepting them on the panel of provider networks for these payers.

We provide this service, for approximately 200 providers each year. This includes verification of education, medical training, DEA and medical licensure. We verify medical licenses throughout the country and have encountered very few states which charge for this verification. In fact, South Dakota is the only state, among our contiguous states, which charges a fee for medical license verification. While the fee is only \$8.00 per verification (although I have learned that some pay \$4.00) we believe that the fee is unnecessary. Verification of licensure is available via electronic means involving no additional work on the part of the medical licensing board. In addition, our physicians already pay \$200 for their licenses and renewals. Verification of licensure is a service we are providing to these same individuals. In essence, by charging us, you are charging the physicians to verify that they have been licensed.

On behalf of Independent Healthcare Associates, I respectfully request that the SDBOME discontinue the practice of charging for this information.

Warm Regards,

A handwritten signature in blue ink, appearing to read "Ann Roemen", is written over the typed name.

Ann Roemen, MBA, CMPE
Executive Director
Ann.roemen@independentcare.org
605-444-8672

cc: Matt McKenzie, MD
Michael Bauer, MD
Cynthia Davis, MD



August 15, 2016

Mr. Tyler Klatt
SD Board of Medical and Osteopathic Examiners
101 N. Main Ave., Ste. 301
Sioux Falls, SD 57104

Dear Mr. Klatt:

The South Dakota Board of Medical and Osteopathic Examiners has proposed the amendment and adoption of ARSD 20:47:07:01, 20:47:07:02, 20:52:01:03.01, 20:52:01:03.02 and 20:82:04. We have reviewed the proposed rules, scheduled for hearing on September 8, 2016, and approve the rules for legality with the following comment:

- Use "shall" as the verb when requiring an action from a person.

This letter is based on a preliminary review of your rules. Attached are your rules edited for form and style pursuant to SDCL 1-26-6.5, the Directions for Submitting the Final Draft of the Rules, and the Interim Rules Review Committee Recommended Rules Presentation Format. If you have any questions, please do not hesitate to call me or the staff member who has reviewed your rules.

Sincerely yours,

A handwritten signature in blue ink that reads "Doug".

Doug Decker
Code Counsel

DD:CVC



Form + Style

ARTICLE 20:47

PHYSICIANS AND SURGEONS

Chapter

- 20:47:01 Definitions, Repealed.
- 20:47:02 Operation of board, Transferred.
- 20:47:03 Licensure.
- 20:47:04 Inspections.
- 20:47:05 Declaratory rulings, Transferred.
- 20:47:06 Fees.
- 20:47:07 Medical record documentation
- 20:47:08 Ethics.

CHAPTER 20:47:07

MEDICAL RECORD DOCUMENTATION

Section

- 20:47:07:01 Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain.
- 20:47:07:02 Definition of chronic pain.

20:47:07:01. Standards for medical records when prescribing controlled substances for the treatment of chronic, non-cancer pain. The standards for medical records when a physician prescribes controlled substances for the treatment of chronic non-cancer pain include each of the following listed items:

- (1) Copies of the signed informed consent and any treatment agreement required by the physician;
- (2) The patient's medical and psychosocial history;
- (3) The results of all physical examinations and all laboratory tests;
- (4) Confirmation that the appropriate state prescription drug monitoring program has been accessed, and the date of that access, or an explanation why it was not accessed; ;
- (5) The results of all risk assessments, including results of any screening instruments used;
- (6) A description of the treatments provided, including all medications prescribed or administered, with the date of prescription or administration, the name and type of the medication, and the dosage and quantity of medication prescribed or administered. The medical records must include all prescription orders for opioid analgesics and other controlled substances, whether written, telephoned, faxed, or electronically transmitted;
- (7) Instructions to the patient, including discussions with the patient and, if appropriate, significant others of the risks and benefits of opioid analgesics, including the risks of addiction, overdose, and death; proper use and storage of medication; proper disposal of unused medications; and the use of naloxone products to reverse overdose;
- (8) Results of ongoing assessments, including, when appropriate, urine drug tests, of patient progress or lack of progress in terms of pain management and functional improvement;
- (9) Notes on any evaluations by and consultations with specialists;

- (10) Any other information used to support the initiation, continuation, revision, or termination of treatment; Any steps taken in response to aberrant medication use by a patient and aberrant behaviors related to a prescription for an opioid analgesic;
- (11) Medical records of past hospitalizations or treatments by other providers, to the extent obtained by the physician;
- (12) Authorization for release of information to other treatment providers; and
- (13) Name, address, and telephone number of the patient's pharmacy.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.

References: Federation of State Medical Boards Model Policy for the Use of Opioid Analgesics in the Treatment of Chronic Pain; Federation of State Medical Boards Model Policy on Data 2000 and Treatment of Opioid Addiction in the Medical Office.

20:47:07:02. Definition of Chronic Pain. For the purposes of section 20:47:07:01, the term, chronic pain, means ongoing, recurrent, or persistent pain lasting beyond the usual course of an acute illness or injury or that is three months or longer in duration.

Source:

General Authority: SDCL 36-4-35.

Law Implemented: SDCL 36-4-29, 36-4-30.

ARTICLE 20:52

PHYSICIAN ASSISTANTS

Chapter

20:52:01 Physician assistant license.

CHAPTER 20:52:01

PHYSICIAN ASSISTANT LICENSE

Section

20:52:01:01	Application for physician assistant license.
20:52:01:02	Repealed.
20:52:01:03	Physician assistant practice agreement.
20:52:01:03.01	Supervision of a licensed physician assistant.
20:52:01:03.02	Supervision of a licensed physician assistant — Separate practice location. Repealed.
20:52:01:04	Repealed.
20:52:01:05	Termination of physician assistant practice agreement.
20:52:01:06 to 20:52:01:08	Repealed.
20:52:01:09	Renewal of physician assistant license.
20:52:01:10	Repealed.
20:52:01:11	Fee amounts.

20:52:01:03.01. Supervision of a licensed physician assistant. A licensed physician assistant shall be supervised by a physician licensed pursuant to SDCL chapter 36-4. The supervising physician shall be available for consultation with the physician assistant at all times while the physician assistant is involved in patient care. The supervising physician and physician

ARTICLE 20:82

GENETIC COUNSELORS

Chapter

- 20:82:01 Definitions.
- 20:82:02 Licensure requirements.
- 20:82:03 Ethics.
- 20:82:04 Continuing education

CHAPTER 20:82:04

CONTINUING EDUCATION

Section

- 20:82:04:01 Continuing education requirements.
- 20:82:04:02 Reporting continuing education *Continuing education confirmation.*

20:82:04:01. Continuing education requirements. To qualify for renewal of a license upon its expiration as prescribed in SDCL 36-36-11, an applicant for renewal ~~must complete 25~~ *shall* ~~25~~ *twenty-five* continuing education hours annually or maintain current certification by the ABGC or ABMGG.

Source

General Authority: 36-36-12

Law Implemented: 36-36-11

Continuing education confirmation.
20:82:04:02. ~~Reporting continuing education.~~ Each genetic counselor must sign a statement to confirm compliance with the continuing education requirements of 20:82:04:01. The signed statement must be filed with the ^b Board at the time the genetic counselor makes application for renewal of ^a ~~their~~ genetic counseling license. Upon request by the board, the genetic counselor ~~must~~ ^{shall} submit proof of completion of any continuing education units or proof of current certification by the ABGC or ABMGG.

Source:

General Authority: SDCL 36-36-12

Law Implemented: SDCL 36-36-11

100

Continuing education requirements

Continuing education requirements for the license shall be as follows:

1. The licensee shall complete a minimum of 12 hours of continuing education each year.

2. The licensee shall complete a minimum of 2 hours of continuing education in the field of the license each year.

3. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

4. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

5. The licensee shall complete a minimum of 1 hour of continuing education in the field of the license each year.

100

100

100

Marty Link

SUMMARY Extensive background in state and national level Emergency Medical Services and Trauma. Proven success in establishing and maintaining relationships with key stakeholders. Expertise in laws and administrative rules pertaining to emergency medical services and trauma. Exceptional work ethic with commitment to organizational objectives with a strong focus on minimizing risk due to non-compliance.

EXPERIENCE

1/12-Present Department of Health, Office of Rural Health

11/15- Present Assistance Administrator to the Office of Rural Health

- Maintain oversight of the statewide EMS Program and Trauma System

1/12- 11/15 Trauma Program Manager

- Collaborate with hospital and EMS agencies for the continued development of the statewide trauma system including performance improvement and data collection

2/02-2/12 South Dakota Office of Emergency Medical Services

5/08-2/12 Emergency Medical Specialist

- Establish and maintain effective relationships with ambulance service directors, EMT candidates, current EMT's and other state offices by enforcing state and national policies

9/08- 2/12 Med-Media Patient Care Reporting System Administrator

- Recognized by the Principal Investigator and Director of the National Emergency Medical Services Information System (NEMSIS) for organizing electronic data collection from emergency service providers in South Dakota

2/02-5/08 Health Program Specialist

- Nationally Certified Test Administrator for the National Registry of Emergency Medical Technicians and Pearson VUE Professional Testing Centers
- Assisted with site visits with Committee on Accreditation of Educational Programs for the Emergency Medical Services Professions for Avera McKennan and Lake Area Tech

EDUCATION

9/09-5/15 Dakota State University Sioux Falls, SD

- Bachelor Business Technology
- Certificate in Management Information Systems

9/95-6/96 Avera McKennan School of EMS Sioux Falls, SD

- Paramedic Program

CERTIFICATION AND TRAINING

- SD Licensed Paramedic

PROFESSIONAL MEMBERSHIP

10/12-Present National Association of State Emergency Medical Service Officials-Trauma Managers Council

- Steering committee member
- North Central Trauma Managers Regional Representative Chair
- Trauma Managers Council Performance Improvement Chair

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

May 2016

By BMOE Staff

LICENSING: Ensure only qualified professionals are licensed and allowed to practice.

Current/Past Events:

Training and Meetings attended

The database vendor, Albertson Consulting continues the process of transferring BMOE data to its Big Picture product. Weekly phone conference call updates continue with the Board staff and the Albertson Consulting project manager and transition team.

The majority of the communications and meetings in May centered around the mobile medic program with Rapid City Fire Department, culminating with the board requested temporary order signed by the executive director which allowed the program to start.

Tyler Klatt attended the National Board for Certification in Occupational Therapy (NBCOT) Inaugural State Regulatory Leadership Forum, held in New Orleans, LA on May 11-13, 2016. The forum provided information on the NBCOT's role and included sessions on competency standards, how NBCOT exams are created, and continuing competency.

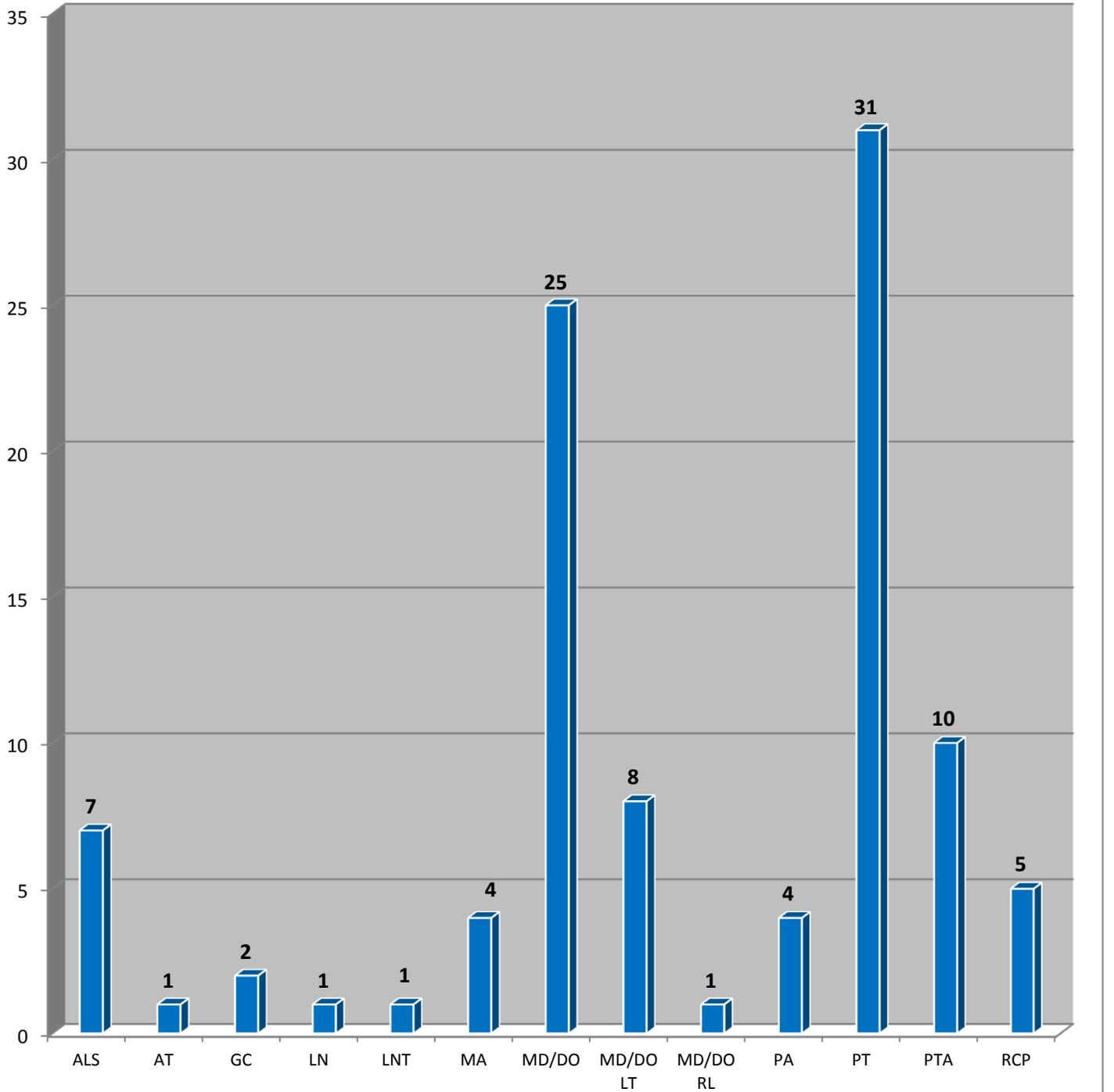
Current and Upcoming Advisory Committee and Staff Meetings:

- Advisory Committee Meeting Schedule
 - Advanced Life Support Advisory Committee – May 25th
 1. Discussed progress on Mobile Medic petition
 2. Reviewed petition from Yankton County EMS
 3. Discussed how to add an AEMT to the committee
 - Athletic Trainer Advisory Committee – May 5th
 1. Began reviewing potential revisions to administrative rules
 - Genetic Counselor Advisory Committee – May 5th
 1. Discussed continuing education requirements
 2. Reviewed potential administrative rule for continuing education
 - Nutrition and Dietetics Advisory Committee – May 10th
 1. Discussed results of previous Interim Rules Review hearing
 2. Began discussions on auditing a selection of the licensees
 - Occupational Therapy Advisory Committee – May 9th
 1. Discussed results of previous Interim Rules Review hearing
 2. Reviewed questions from licensees
 - Physical Therapy Advisory Committee – May 17th
 1. Reviewed statutes that are over 30 years old
 2. Discussed working with the SDPTA on potential statute revision

- Physician Assistant – May 25th
 1. Discussed incoming new member
 2. Reviewed 90 day supervision rule
 3. Reviewed the new draft of the spouse supervision rule
- Respiratory Care Practitioners – May 26th
 1. Updated on committee terms and upcoming reappointments
 2. Discussed the impact of the memo sent to SDSRC
 3. Continued discussion on medical directors

Statistics

100 New Licensures Issued in May 2016



Board of Medical and Osteopathic Examiners

ALS – Advanced Life Support

AT – Athletic Trainer

GC – Genetic Counselor

LN – Licensed Nutritionist/ Dietitian

LNT – Licensed Nutritionist/ Dietitian Temp

MA – Medical Assistant

MD/DO – Medical License

MD/DO LT – Physician Locums Tenens

MD/DO RL – Resident Medical License

PA – Physician Assistant

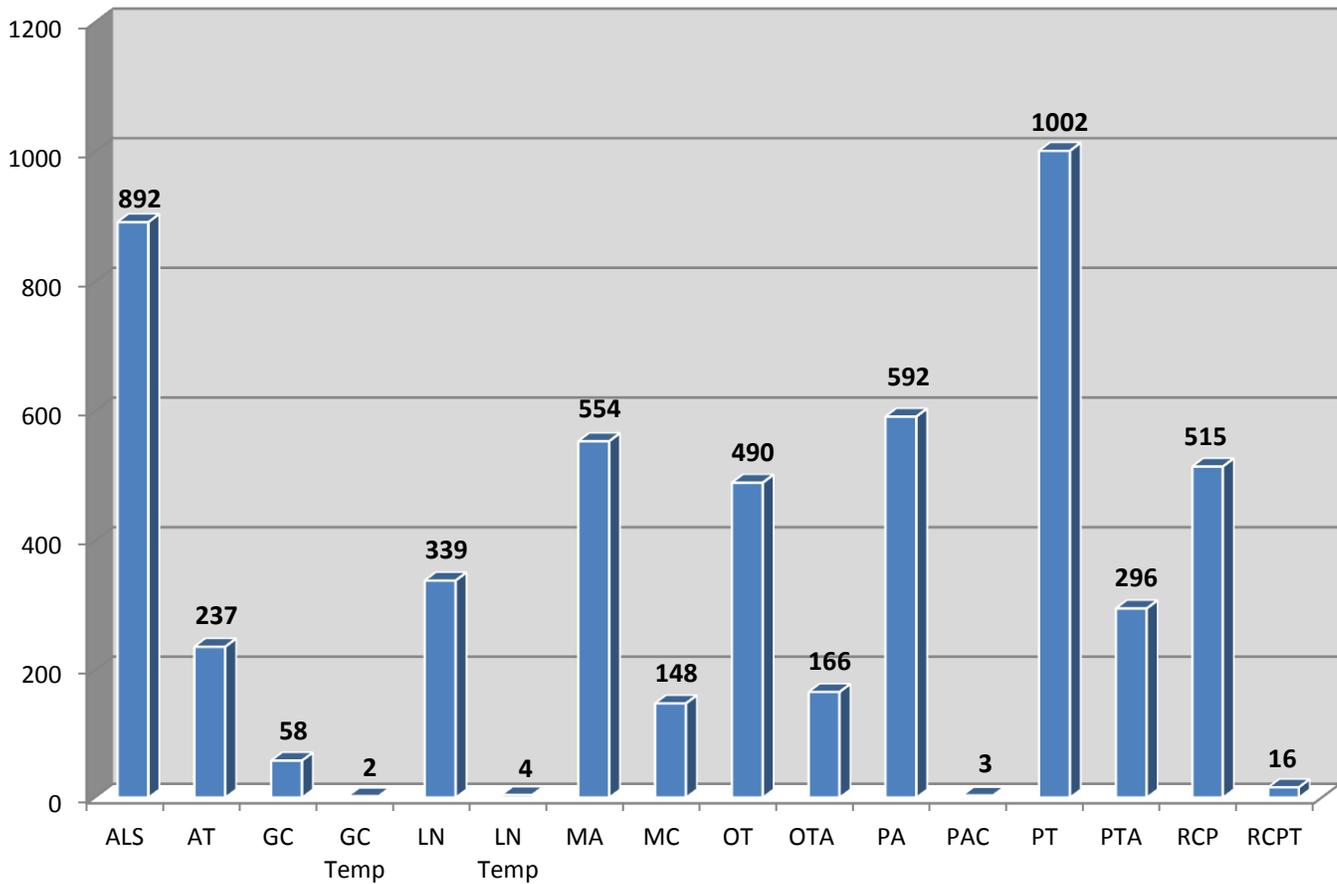
PT – Physical Therapist

PTA – Physical Therapist Assistant

RCP – Respiratory Care Practitioner

Current Non-Physician Counts

(As of 05/26/2016)

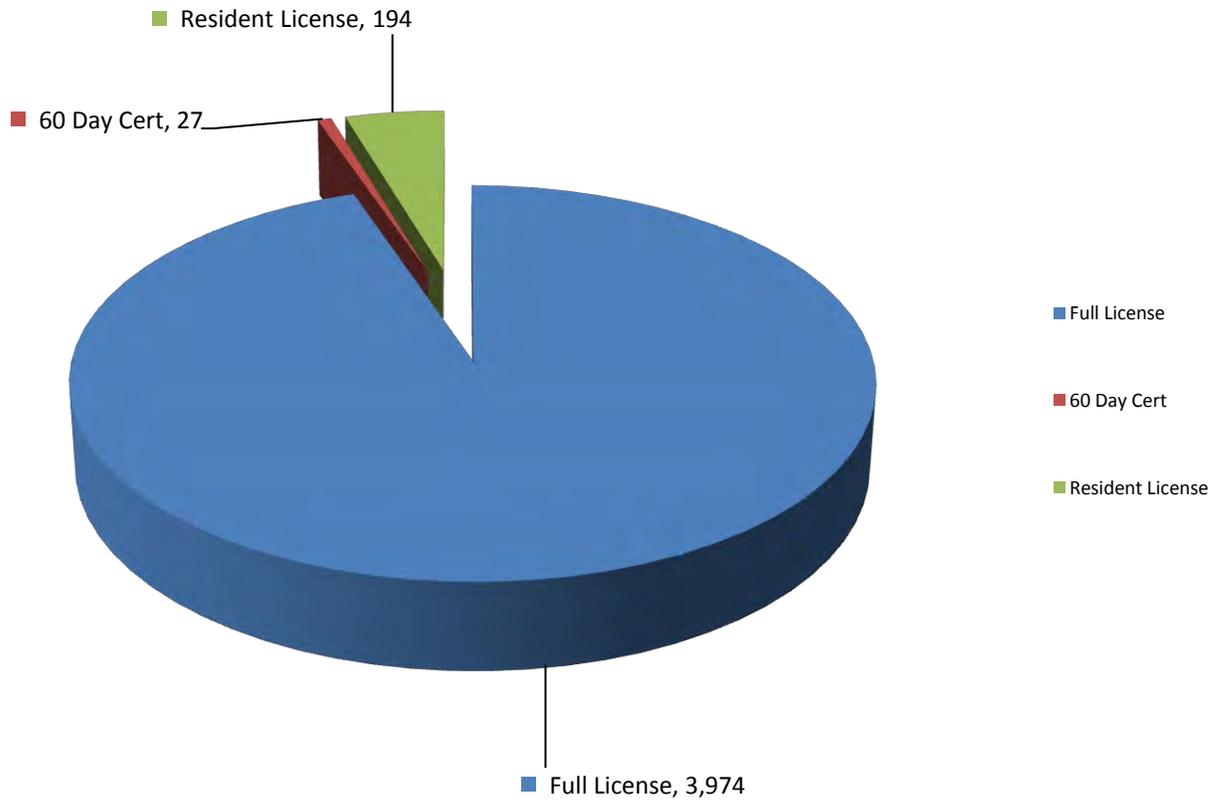


ALS – Advanced Life Support
AT – Athletic Trainer
GC – Genetic Counselor
LN – Licensed Nutritionist
MA – Medical Assistant
MC – Medical Corporation
OT – Occupational Therapist

OTA – Occupational Therapy Assistant
PA – Physician Assistant
PAC – Physician Assistant Corporation
PT – Physical Therapist
PTA – Physical Therapist Assistant
RCP – Respirator Care Practitioner

Current MD/DO Counts

(As of 05/26/2016)



INVESTIGATIONS: Ensure complaints and issues are properly investigated and resolved.

Issues

Complaints:

Summary of new applications

- 1.) New Licenses were issued
 - a. 100 new licenses issued
 - b. 28 complex applications resolved or closed

Statistics

**Investigations and Complaints
(As of 05/26/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Resolved</u>
Complex Applications	16	86	28
Complaints/ Investigations	12	59	9
Competency (Malpractice cases)	0	414	0

**Reinstatement and Renewal Applications
(As of 05/26/2016)**

<u>Category</u>	<u>New</u>	<u>On-going</u>	<u>Completed</u>
Reinstatement and Renewal Applications	4	26	6

OUTREACH: Make life easier for our customers.

Education

The Executive Director and Board staff continues to meet and do outreach to the medical school, residency programs, healthcare recruiters, clinic managers, health system administrators, state regulatory boards and associations as well as with the SDBMOE licensees.

Outreach Efforts:

Outreach Activities

(Totals reflect activities from first to last day of month)

Activity	Organization	# Participants	Topic Covered
Training	Academic Program (Residency) Directors & Coordinators. Healthcare Systems Recruiter. Board & Advisory Members	120	Licensing discussion
Phone/General Email	Licensees/ Applicants	395	General questions
In-Office Assistance	Licensees/ Applicants	153	Renewal and general questions

Upcoming Events:

- **2016 Meeting Dates**
 - September 8 and December 1
- **2017 Meeting Dates**
 - March 9, June 8, September 14, and December 14
- **2018 Meeting Dates**
 - March 8, June 14, September 13, and December 13

ARTICLE 20:78

BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

CHAPTER 20:78:04

COMPLAINT PROCEDURES

Section

20:78:04:01 Applicability.

20:78:04:02 Complaints.

20:78:04:03 Investigations.

20:78:04:04 Completion of complaint investigation.

20:78:04:04.01 Disciplinary action in another state.

20:78:04:05 Status of complainant.

20:78:04:06 Effect of failure to renew during investigation.

20:78:04:04.01 Disciplinary action in another state. Any physician who has any public board action imposed by another state shall have the original documentation posted on the South Dakota Board of Medical and Osteopathic Examiners website, subject to the following conditions:

- (1) All board action, which does not condition a license, may be posted to the website in lieu of the South Dakota Board taking action, and this is not a reportable event by the South Dakota Board;
- (2) Any license in another state with current conditions is subject to discipline in South Dakota per SDCL chapter 36-4-30 (24);
- (3) In the instance where any physician has board action imposed by another state, the board may review and consider the timeframe and substance to determine if the discipline per SDCL chapter 36-4-28, 36-4-29, and 36-4-30 is appropriate or exercise their discretion, to post to the website.

DRAFT

THE BOARD OF MEDICAL AND
OSTEOPATHIC EXAMINERS OF THE
STATE OF SOUTH DAKOTA

IN THE MATTER OF:

16-119

ANTHONY M. LUND
Applicant for EMT Student Status
Respondent.

NOTICE OF HEARING

Please take notice that the recommendation of the hearing examiner will be presented to the South Dakota Board of Medical and Osteopathic Examiners in the above captioned matter. The hearing will take place on Thursday, September 8, 2016, in the Board Room, 101 N. Main Ave., Suite 215, Sioux Falls, SD, beginning at 11:00 pm (CDT).

Please be advised that scheduled times are estimates only, and hearings may be delayed due to prior scheduled agenda items.

Dated this 25 day of August, 2016.



William H. Golden, esq.
Assistant Attorney General/Civil Litigation Division
317 N. Main Ave.
Sioux Falls, SD 57104
Attorney for the South Dakota Board of
Medical and Osteopathic Examiners
(605) 201-8588

STATE OF SOUTH DAKOTA } s.s.
MINNEHAHA COUNTY }
I hereby certify that the foregoing
instrument is a true and correct copy
of the original as the same appears
on the record in my office.

Executive Secretary
By MBH ky JYP
Date 8-25-16

CERTIFICATE OF SERVICE

I hereby certify that on August 25, 2016, I mailed, by first class mail, postage prepaid, a true and correct copy of the foregoing Notice of Hearing to Anthony M. Lund, 821 S. Foster Avenue, Sioux Falls, SD 57103 and emailed a copy to alund75@gmail.com



William H. Golden

Mobile Medic Update

At this time one monthly report has been received from the Rapid City Fire Department (RCFD) regarding the Mobile Medic. There were 32 calls that involved the Mobile Medic. Of these 32 calls:

- 7 resulted in transports
- 6 were to assist the ambulance
- 19 were calls responded to solely by the mobile medic and did not result in transport

All of the calls received in the report were reviewed by SDBMOE staff and suggestions were sent to the RCFD. The suggestions included:

- Ensure physician (medical control) is being contacted for recommendations after every assessment and prior to giving any recommendation(s) to the patient
- Documentation should be more detailed and thorough
- Be careful about the patient information that the mobile medic is disclosing to law enforcement

Jason Culberson said that these items were discussed with Mobile Medic Christopher Jolley.

ARTICLE 20:64

OCCUPATIONAL THERAPY AND OCCUPATIONAL THERAPY ASSISTANTS

CHAPTER 20:64:03

SUPERVISION

Section

20:64:03:01 Direct supervision of occupational therapy aide.

20:64:03:02 Supervision of occupational therapy assistant.

20:64:03:03 Consultation.

20:64:03:04 Supervision registration

Section

20:64:03:04 Supervision registration.

20:64:03:04 Supervision registration. No occupational therapist may act as a supervising occupational therapist for any occupational therapy assistant or occupational therapy aide who is a member of the occupational therapist's immediate family unless specific authorization for such supervision has been approved by the Board. For purposes of this section, immediate family means a spouse, parent, child, or sibling of the supervising physician or other persons with whom the physician lives or commingles assets.

Source:

General Authority: SDCL 36-31-13

Law Implemented: SDCL 36-31-1

CHAPTER 20:52:01

PHYSICIAN ASSISTANT LICENSE

Section

20:52:01:01	Application for physician assistant license.
20:52:01:02	Repealed.
20:52:01:03	Physician assistant practice agreement.
20:52:01:03.01	Supervision of a licensed physician assistant.
20:52:01:03.02	Supervision of a licensed physician assistant — Separate practice location. Repealed.
20:52:01:04	Repealed.
20:52:01:05	Termination of physician assistant practice agreement.
20:52:01:06 to 20:52:01:08	Repealed.
20:52:01:09	Renewal of physician assistant license.
20:52:01:10	Repealed.
20:52:01:11	Fee amounts.

20:52:01:03.01. Supervision of a licensed physician assistant. A licensed physician assistant shall be supervised by a physician licensed pursuant to SDCL chapter 36-4. The supervising physician shall be available for consultation with the physician assistant at all times while the physician assistant is involved in patient care. The supervising physician and physician

assistant shall meet ~~in person at least twice each month~~ to discuss patient care and review the physician assistant practice. ~~The meetings shall be held in person unless it is established in the practice agreement and approved by the board that one of the twice monthly meetings may be held by telecommunication.~~ The supervision plan shall be outlined in the practice agreement and approved by the board. ~~The practice agreement shall also outline provisional supervision plans in the event unforeseen circumstances such as inclement weather or illness prevent the twice monthly meeting supervision requirement.~~

Source: 34 SDR 93, effective October 17, 2007.

General Authority: SDCL 36-4A-42.

Law Implemented: SDCL 36-4A-29.

~~**20:52:01:03.02. Supervision of a licensed physician assistant -- Separate practice location.** In addition to the required two meetings per month, the supervising physician must be physically present on-site every ninety days at each physician assistant practice location. This requirement does not apply to locations where health care services are not routine to the setting, including patient homes and school health screening events. Repealed.~~

~~—— **Source:** 34 SDR 93, effective October 17, 2007.~~

~~—— **General Authority:** SDCL 36-4A-42.~~

~~—— **Law Implemented:** SDCL 36-4A-29.~~

THE BOARD OF MEDICAL AND
OSTEOPATHIC EXAMINERS OF THE
STATE OF SOUTH DAKOTA

IN THE MATTER OF:)	NO. 16-119
)	
Anthony Lund)	PETITION FOR BOARD OF
)	MEDICAL AND OSTEOPATHIC
Respondent.)	EXAMINERS
)	
)	

COMES NOW, the Executive Secretary of the South Dakota Board of Medical and Osteopathic Examiners (BMOE) and files this Petition pursuant to SDCL 36-4B-6, 31, SDCL 1-26 and South Dakota's Administrative Rules (ARSD) 20:78:04 and 05. Respondent, Anthony Lund submitted an application for a student status and reported that he had been convicted of a felony.

Respondent's address as reported to the BMOE is:

921 S. Foster Ave., Sioux Falls, SD 57103

After investigation, Mr. Lund was notified by letter on January 13, 2016, that he is ineligible for a student status because he had not been tentatively accepted into an educational program, and because he has a felony conviction. Respondent has contested this recommendation. The Secretary, pursuant to ARSD 20:78:04 and ARSD 20:78:05, therefore files this Petition for a contested case hearing.

A. TIME, PLACE AND NATURE OF HEARING

Hearing. A contested case hearing on this licensure action shall be heard by a Hearing Examiner pursuant to ARSD 20:78:05:04. The hearing shall begin at 9:30 am (central time) on Friday, July 22, 2016, in the BMOE Conference Room, 101 North Main Avenue, Suite 215, Sioux Falls, South Dakota 57104.

Answer. Respondent may file an Answer within twenty (20) days of the date he is served with this Petition. An Answer, if filed, should specifically admit, deny, or otherwise answer all allegations contained in sections C and D of this Petition. The Answer and any other pleading must be filed with the BMOE at the following address: BMOE, 101 North Main Avenue, Suite 301, Sioux Falls, South Dakota 57104.

Presiding Officer. The Hearing Examiner will preside over the hearing and make a recommended decision consisting of proposed Findings of Fact, Conclusions of Law, and an Order, to the Board. ARSD 20:78:05:06. The BMOE will read the record, transcript of the contested case proceeding, and all exhibits, and make its decision thereon at a BMOE meeting following the contested case hearing. The BMOE may request that the parties appear to present oral argument and objections to the Hearing Examiner's recommended decision. ARSD 20:78:05:06.

Hearing Procedures. The procedural rules governing the conduct of the hearing are found at SDCL chs. 36-4B and 1-26, and ARSD chs. 20:78:05. The contested case proceeding is an adversarial proceeding. At the hearing, you have the right to be present, to appear personally, and/or to be represented by legal counsel at your own expense. You will be allowed the opportunity to respond to the allegations of the Petition, to produce evidence on your behalf, to present witnesses, to cross-examine witnesses, and to examine and respond to any documents introduced at hearing. These and other due process rights will be forfeited if they are not exercised at the hearing.

The hearing is open to the public.

Any decision of the BMOE based on the contested case proceeding may be appealed to the circuit court and the State Supreme Court as provided by law.

Pre-hearing Conferences and Continuances. Any party may request a pre-hearing conference to discuss evidentiary issues related to hearing, or may request a continuance, by filing a motion for a prehearing conference with the BMOE at the address above.

Prosecution. Counsel for the Secretary is responsible for representing the public interest (the State) in this proceeding. Counsel for the Secretary is: William H. Golden, Assistant Attorney General, South Dakota Attorney General's Office, 101 North Main Avenue, Suite 301, Sioux Falls, South Dakota 57104. Copies of all pleadings filed in this matter must be provided to Counsel for the Secretary at this address.

Communications. You may not contact Board members in any manner, including by phone, letter, in person, or by e-mail about this Petition. Board members may only receive information about the case when all parties have notice and an opportunity to participate, such as at the hearing or in pleadings you file with the BMOE office and serve upon all parties in this case. See SDCL 1-26-26.

B. LEGAL AUTHORITY AND JURISDICTION

Jurisdiction. The BMOE has jurisdiction in this matter pursuant to SDCL 36-4B.

Legal Authority. If any of the allegations against you are founded, the BMOE has authority to take disciplinary action against you under SDCL 36-4B-6, 31 and 36-4-30, and ARSD 20:78:04 and 05.

Default. If you fail to appear at the hearing, the BMOE may enter a default decision or proceed with the hearing and render a decision in your absence in accordance with SDCL 1-26.

C. SECTIONS OF STATUTES AND RULES INVOLVED

Count I

Anthony Lund is subject to denial under SDCL 36-4B-13 for failing to prove Good Moral Character when he submitted his application for an Advanced Life Support Student Status on January 12, 2016 (Exhibit 1, Pages 3-7). On his application, Mr. Lund reported 3 misdemeanor DUI's in 1998, 1999, and 2000. Mr. Lund also said he received a 3rd felony offense DUI in 2006.

FACTUAL CIRCUMSTANCES

Anthony Lund submitted an application for an Advanced Life Support Student Status on January 12, 2016 (Exhibit 1, Pages 3-7). On his application, Mr. Lund reported 3 misdemeanor DUI's in 1998, 1999, and 2000. Mr. Lund also said he received a 3rd felony offense DUI in 2006

1. The Board staff requested and received a SD record inquiry (Exhibit 2, Pages 8-10). The record inquiry revealed the following:

Count of 32-23-4 (F6) Driving Under the Influence – 3rd offense: Judgment on Plea of Guilty on 3/29/2006

Count of 99-1-39 (M2) Deviating: Dismissed on 01/12/2006

Count of 32-12-65 (M1) Driving with Revoked License: Dismissed on 01/12/2006.

2. Mr. Lund was sentenced to 365 days in jail, concurrent with 185 days suspended for the 3rd offense DUI. Dr. Lund's driver's license was also revoked for 1 year.

3. Mr. Lund was emailed and mailed a letter on January 13, 2016, to inform him that he is ineligible for student status for two reasons (Exhibit 3, Pages 11-12). The first reason is that he had not yet been interviewed by an educational program and is therefore not tentatively accepted. The second reason is that he has a felony conviction and would be ineligible for any eventual licensure. Mr. Lund was given 10 days to appeal.
4. Mr. Lund submitted a letter on January 21, 2016, stating that he wished to appeal.
5. It is hereby requested that Mr. Lund's application be denied under SDCL 36-4B-6-13 and 36-4-30(6) for failing to prove Good Moral Character

SETTLEMENT

This matter may be resolved by settlement agreement. The procedural rules governing the BMOE's settlement process are found at ARSD

20:78:04:04. If you are interested in pursuing settlement of this matter, please contact William Golden, Assistant Attorney General, at (605) 201-8588.

Signed pursuant to Article 20:78:05:02: Petitions for hearing. An applicant for a license, permit, or certificate issued by the board may file a petition for hearing at any time during the processing of an application. The executive secretary may file a petition for hearing to initiate a disciplinary proceeding against a licensee. A petition for hearing shall be signed by the petitioner and contain the following information: the name and address of the applicant or licensee, the basis for the request for hearing, recitation of the applicable statutes or regulations under which the petitioner is requesting board action, and the relief requested by the petitioner.

By: Margaret B. Hansen Date: 7/12/2016
Margaret B. Hansen
Executive Director
South Dakota Board of Medical
and Osteopathic Examiners

Copies to: William Golden
Assistant Attorney General
101 M. Main Ave., Suite 301
Sioux Falls, SD 57104

Anthony Lund
921 S. Foster Ave.
Sioux Falls, SD 57103

ARTICLE 20:47

PHYSICIANS AND SURGEONS

Chapter

- 20:47:01 Definitions, Repealed.
- 20:47:02 Operation of board, Transferred.
- 20:47:03 Licensure.
- 20:47:04 Inspections.
- 20:47:05 Declaratory rulings, Transferred.
- 20:47:06 Fees.
- 20:47:07 Reserved.
- 20:47:08 Ethics.
- 20:47:09 Supervision

CHAPTER 20:47:09

SUPERVISION

Section

- 20:47:09:01 Supervision provided by physician

20:47:09:01 Supervision provided by a physician. No physician may act as a supervising physician, medical director, or team or treating physician for physician assistants, advanced life support personnel, respiratory care practitioners, athletic trainers, medical assistants, or any other profession licensed and regulated by the Board that is a member of the physician's immediate family unless specific authorization for such supervision has been approved by the Board. For purposes of this section, immediate family means a spouse, parent,

child, or sibling of the supervising physician or other persons with whom the physician lives or commingles assets.

Source:

General Authority: SDCL 36-4-35

Law Implemented: SDCL 36-4A-29, 36-4B-15, 39-4C-1 36-9B-1, 36-29-1, 36-36-10

DRAFT

STATE OF SOUTH DAKOTA
DEPARTMENT OF HEALTH
BOARD OF MEDICAL AND OSTEOPATHIC EXAMINERS

IN THE MATTER OF:

16-119

ANTHONY MICHAEL LUND
Applicant for EMT Student Status

FINAL ORDER

The above captioned matter came before the Board of Medical and Osteopathic Examiners (Board) on Thursday, September 8, 2016. Anthony M. Lund (did/did not) appear personally or with counsel. Board staff was present and represented by Assistant Attorney General William Golden. The Board being otherwise fully informed of the facts and issues pertinent to the matter, the Board issues the following:

The Board hereby

FINDS that Mr. Lund submitted an application for an EMT Student Status and he reported 3 DUI misdemeanors, and a DUI felony conviction. He was notified by the Board staff that he was ineligible for a student status or eventual licensure due to his felony conviction, and due to the fact that he had not been interviewed nor accepted into an advanced life support educational program. Mr. Lund was informed that he had ten (10) days to appeal his ineligibility, and he sent his letter of appeal. An administrative hearing was held on July 22, 2016. The Board further

FINDS that the administrative hearing judge prepared Findings of Fact, Conclusions of Law and a recommendation to the Board to deny the application submitted by Mr. Lund.

Based upon the foregoing, it is hereby

ORDERED that the attached and incorporated Findings of Fact, Conclusions of Law and Recommendation to deny the application submitted by Mr. Lund are accepted by the Board, and it is further

ORDERED that these documents are public records of the Board and the State of South Dakota and shall be published on the Board's website and reported as necessary to the national practitioner data bank and other entities deemed appropriate by the Board in compliance with State and Federal law.

Dated this ___ day of September, 2016

By: _____

Walter O. Carlson, MD, MBA
Board President

ARTICLE 20:66

PHYSICAL THERAPISTS AND PHYSICAL THERAPIST ASSISTANTS

CHAPTER 20:66:03

SUPERVISION

Section

20:66:03:01 Supervision registration.

20:66:03:01 Supervision registration No physical therapist may act as a supervising physical therapist for any physical therapist who is a member of the physical therapist's immediate family unless specific authorization for such supervision has been approved by the Board. For purposes of this section, immediate family means a spouse, parent, child, or sibling of the supervising physician or other persons with whom the physician lives or commingles assets.

Source:

General Authority: SDCL 36-10-36

Law Implemented: SDCL 36-10-35.8

ARTICLE 20:82
GENETIC COUNSELORS

Chapter

- 20:82:01 Definitions.
- 20:82:02 Licensure requirements.
- 20:82:03 Ethics.
- 20:82:04 Continuing education

CHAPTER 20:82:04

CONTINUING EDUCATION

Section

- 20:82:04:01 Continuing education requirements
- 20:82:04:02 Reporting continuing education

20:82:04:01. Continuing education requirements. To qualify for renewal of a license upon its expiration as prescribed in SDCL 36-36-11, an applicant for renewal must complete 25 continuing education hours annually or maintain current certification by the ABGC or ABMGG.

Source

General Authority: 36-36-12

Law Implemented: 36-36-11

20:82:04:02. Reporting continuing education. Each genetic counselor must sign a statement to confirm compliance with the continuing education requirements of 20:82:04:01. The signed statement must be filed with the Board at the time the genetic counselor makes application for renewal of their genetic counseling license. Upon request by the board, the genetic counselor must submit proof of completion of any continuing education units or proof of current certification by the ABGC or ABMGG.

Source:

General Authority: SDCL 36-36-12

Law Implemented: SDCL 36-36-11

